

PROGRAM	PROGRAM DESCRIPTION	PROGRAM DEVELOPER	TARGET POPULATION			TARGET SETTING	KEY OUTCOMES	KEY PROGRAM STRATEGIES	COST ESTIMATES
			Age	Gender	Ethnicity				
Across Ages Selective	<p>Across Ages is a school- and community-based drug prevention program for youth 9 to 13 years, that seeks to strengthen the bonds between adults and youth and provide opportunities for positive community involvement. The unique and highly effective feature of Across Ages is the pairing of older adult mentors (age 55 and above) with young adolescents, specifically youth making the transition to middle school. The program employs mentoring, community service, social competence training, and family activities to build youths' sense of personal responsibility for self and community. Specifically, the program aims to:</p> <ul style="list-style-type: none"> • Increase knowledge of health and substance abuse and foster healthy attitudes, intentions, and behavior toward drug use among targeted youth • Improve school bonding, academic performance, school attendance, and behavior and attitudes toward school • Strengthen relationships with adults and peers • Enhance problem-solving and decisionmaking skills <p>The overall goal of the program is to increase the protective factors for high-risk students in order to prevent, reduce, or delay the use of alcohol, tobacco and other drugs and the problems associated with such use.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Best Practice Model in Youth Violence Prevention: Centers for Disease Control and Prevention</p> <p>Top 25, Positive Youth Development Program: U. S. Department of Health and Human Services</p> <p>Commendable Practice: Child Welfare League of America</p> <p>Model Program: Case Study for North America: United Nations Office of Drug Control Programs</p>	<p>Andrea S. Taylor, Ph.D. Center for Intergenerational Learning Temple University 1601 N. Broad Street, USB 206 Philadelphia, PA 19122 Phone: (215) 204-6970 Fax: (215) 204-3195 Email: ataylor@temple.edu Web site: www.temple.edu/cil/Acrossageshome.htm</p> <p>Denise Logan Center for Intergenerational Learning Temple University Phone: (215) 204-8687 Fax: (215) 201-3195 Email: dlogan00@nimbus.ocis.temple.edu</p>	9-13	Male and Female	African American American Indian/Alaskan Native Asian American Hispanic/Latino Native Hawaiian and Other Pacific Islander (NHOP) White	Rural, Suburban, and Urban middle schools and community centers	<ul style="list-style-type: none"> • Decreased substance use • Decrease in tobacco and alcohol use • Increased problem solving ability • Increased school attendance • Decreased suspensions from school • Improved attitude toward adults • Improved attitude toward school and the future 	<ul style="list-style-type: none"> • Pairing older adult mentors (55+) with middle school youth • Community service • Life management skills • Family activities 	<p>Training:</p> <ul style="list-style-type: none"> • \$1,000 per day, plus expenses • \$500 per day for onsite TA <p>Materials:</p> <ul style="list-style-type: none"> • \$75 Manual • \$25 Handbooks for parents, students • \$25 Elder Mentor Handbooks • \$65 Mentor Training Guide • \$25 Evaluation Protocol • \$25 Video • Materials also available in Spanish.

<p>Al's Pals: Kids Making Healthy Choices</p> <p>Universal</p>	<p>Al's Pals: Kids Making Healthy Choices is a resiliency-based early childhood curriculum and teacher training program that develops personal, social, and emotional skills in children 3 to 8 years old. Using 46 interactive lessons, Al's Pals teaches children how to:</p> <ul style="list-style-type: none"> • Express feelings appropriately • Use kind words • Care about others • Use self-control • Think independently • Accept differences • Make friends • Solve problems peacefully • Cope • Make safe and healthy choices • Understand that tobacco, alcohol, and illegal drugs are not for children <p>The lessons use guided creative play, brainstorming, puppetry, original music, and movement to develop children's social-emotional competence and life skills. A nine-lesson booster curriculum is used in second or third grade with children who have previously received the full program.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Promising Program: Safe, Disciplined and Drug-Free Schools, U.S. Department of Education</p> <p>Effective Program: Collaborative for Academic, Social, and Emotional Learning (CASEL)</p>	<p>Susan R. Geller President Wingspan LLC 4196-A Innslake Dr. Glen Allen, VA 23060 Phone: (804) 967-9002 Fax: (804) 967-9003 Email: sgeller@wingspanworks.com Web site: www.wingspanworks.com</p>	3-8	Male and Female	African American White	Rural, Suburban, and Urban preschools, early elementary grades, after-school programs, and child care centers	<ul style="list-style-type: none"> • Increases in prosocial behaviors • Reductions in problem behaviors • Increases in positive coping behaviors • Decreases in negative coping behaviors • Prevention of increases in antisocial and aggressive behaviors 	<ul style="list-style-type: none"> • Small group activities • Group discussions • Worksheet tasks • Videotaping • Games • Art activities 	<p>Training:</p> <ul style="list-style-type: none"> • N/A <p>Materials:</p> <ul style="list-style-type: none"> • N/A
<p>All Stars™</p> <p>Universal Selective</p>	<p>All Stars™ is a school- or community-based program designed to delay and prevent high-risk behaviors in middle school-age adolescents (11 to 14 years old), including substance use, violence, and premature sexual activity, by fostering development of positive personal characteristics. A highly interactive program, All Stars involves 9 to 13 lessons during its first year, and 7 to 8 booster lessons in its second year.</p> <p>All Stars is based on strong research that has identified the critical factors that lead young people to begin experimenting with substances and participating in other high-risk behaviors. The</p>	<p>William B. Hansen, Ph.D. President Tangelwood Research Inc. 7017 Albert Pick Road, Suite D Greensboro, NC 27409 Phone: (800) 826-4539, ext. 101 Fax: (336) 662-0099 Email: billhansen@tanglewood.net Web site: www.tanglewood.net</p> <p>Kathleen Simley Tangelwood Research Inc. Phone: (800) 822-7148 Email: kathleensimley@alltel.net</p>	11-15	Male and Female	African American American Indian/Alaskan Native Asian American Hispanic/Latino Native Hawaiian and Other Pacific Islander (NHOP) White	Rural, Suburban, and Urban schools and communities	<ul style="list-style-type: none"> • Increased commitment to avoid high-risk behaviors • Increased bonding to school and peers • Positive changes in substance use and violence 	<ul style="list-style-type: none"> • Accurate beliefs about peer norms • Perception on how substance abuse affects preferred lifestyles • Commitment to stay substance free • Social and peer bonding 	<p>Training:</p> <ul style="list-style-type: none"> • \$3,000, plus expenses for up to 20 trainees <p>Materials:</p> <ul style="list-style-type: none"> • \$165 Facilitator • \$175 for 25 Student materials • \$140 Community set for 20 students • \$15 Commitment ring • \$8 T-shirt • Parental/take-home materials also available in Spanish.

	<p>program is designed to reinforce positive qualities that are typical of youth at this age; it works to strengthen five specific qualities that are vital to achieving preventive effects:</p> <ul style="list-style-type: none"> • Developing positive ideals and future aspirations • Establishing positive norms • Building strong personal commitments • Promoting bonding with school and community organizations • Promoting positive parental attentiveness <p>All Stars is available in formats for delivery in schools as part of regular classroom instruction, and in after-school and community-based organizations and programs.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Promising Program: U.S. Department of Education</p>								
<p>ATLAS (Athletes Training and Learning to Avoid Steroids)</p> <p>Universal</p>	<p>ATLAS (Athletes Training and Learning to Avoid Steroids) is a multicomponent school-based program for male high school athletes (13 to 19 years old). It capitalizes on team-centered dynamics and uses positive peer pressure and role modeling to reduce the use of:</p> <ul style="list-style-type: none"> • Anabolic steroids • Alcohol and other drugs • Performance-enhancing supplements <p>Delivered to school sports team, with instruction led by student athlete peers and facilitated by coaches, ATLAS promotes healthy nutrition and exercise behaviors as alternatives to substance use. The 10-session curriculum is highly scripted and contains interactive and entertaining activities that make it easy and desirable to deliver, enhancing the fidelity of the intervention. The product of 10 years of research and field testing, ATLAS focuses specifically on adolescent male athletes' risk and protective factors.</p>	<p>Linn Goldberg, M.D. Division of Health Promotion and Sports Medicine Oregon Health Sciences University, CR 110 3181 SW Sam Jackson Park Road Portland, OR 97201 Phone: (503) 494-8051 Fax: (503) 494-1310 Email: goldberl@ohsu.edu Web site: www.atlasprogram.com</p>	13–19	Male Only	African American American Indian/Alaska Native Asian American Hispanic/Latino Native Hawaiian and Other Pacific Islander (NHOPI) White	Rural, Suburban, and Urban high school athletic teams	<ul style="list-style-type: none"> • Reduced steroid use • Belief that coaches do not condone or tolerate steroid use • Reduced use of alcohol and illicit drug use • Reduced drinking and driving • Reduction in use of • Improved nutrition and exercise behaviors • Increased feeling of self- 	<ul style="list-style-type: none"> • Knowledge of effects of steroids on body and on sport • Healthy, natural alternatives to increasing muscle • Anabolic steroid prevention • Team centered, peer delivered, gender specific approach • Understanding harm of illicit drugs and alcohol on athletic abilities 	<p>Training:</p> <ul style="list-style-type: none"> • Not required. Available on request <p>Materials:</p> <ul style="list-style-type: none"> • \$149.95 full set

	Recognition Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services Exemplary Program: U.S. Department of Education Effective Program: National Institute on Drug Abuse						efficacy as athletes • Stronger team mentality		
Border Binge-Drinking Reduction Program Universal	<p>The Border Binge-Drinking Reduction Program provides multilevel, community-based interventions proven effective at reducing alcohol-related trauma caused by cross-border binge drinking by young Americans.</p> <p>Because the United States, Mexico, and Canada have significant disparities in the legal drinking age, the price of alcohol, and the enforcement of alcohol sales regulations, it is legal or easier for those under age 21 to obtain alcohol. Thousands of American teens and young adults (age 24 and below) are prompted to go into these nearby countries to binge drink. Consequently, an alarming number of young Americans return to the United States drunk, presenting a significant risk to themselves and the public through the increased potential for car crashes and other alcoholrelated violence.</p> <p>The Border Binge-Drinking Program is a binational effort that employs environmental management and media advocacy to curb these irresponsible drinking practices, including:</p> <ul style="list-style-type: none"> • Regular surveys of youths returning from a night of drinking, including anonymous blood alcohol concentration (BAC) breath tests. • Strong media advocacy programs which use information from the surveys to characterize the problem and mobilize the community to action. <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p>	<p>Robert Voas Pacific Institute for Research and Evaluation 11710 Beltsville Drive, Suite 300 Calverton, MD 20705 Phone: (301) 755-2700 Email: voas@pire.org Web site: www.pire.org/centers/BorderProgram.htm</p> <p>James Baker Institute for Public Strategies 148 E. 30th Street, Suite B National City, CA 91950 Phone: (406) 582-1488 Email: jamesbaker@publicstrategies.org Web site: www.publicstrategies.org/BORDER_PROJECT.htm</p> <p>Kim Herbstritt Operations and Planning Manager Institute for Public Strategies 148 E. 30th Street, Suite B National City, CA 91950 Phone: (619) 474-8844, ext 13 Fax: (619) 474-8838 Email: kherbstrett@publicstrategies.org</p> <p>Eileen Taylor Program Director Pacific Institute for Research and Evaluation 11710 Beltsville Drive, Suite 300 Calverton, MD 20705-2719 Phone: (301) 755-2719 Fax: (301) 755-2799 Email: etaylor@pire.org Web site: www.pire.org/centers/BorderProgram.htm</p>	24 and under	Male and Female	Multiple Ethnic Groups	Rural and Urban communities	<ul style="list-style-type: none"> • Reduced number of young Americans returning to the U.S. with illegal BACs after night of drinking in Mexico • Reduced number of alcohol-related injury crashes among underage drinkers • Reduced number of arrests for violence and other problems • Increased awareness of new enforcement program 	<ul style="list-style-type: none"> • Enhance alcohol law enforcement on border • Promote responsible beverage service practices • Create binational youth service center • Implement media advocacy programs 	<p>Training:</p> <ul style="list-style-type: none"> • No formal training <p>Materials:</p> <ul style="list-style-type: none"> • No formal materials

<p><u>Brief Alcohol Screening and Intervention for College Students (BASICS)</u></p> <p>Selective Indicated</p>	<p>BASICS, Brief Alcohol Screening and Intervention of College Students: A Harm Reduction Approach, is a preventive intervention for college students 18 to 24 years old. It is aimed at students who drink alcohol heavily and have experienced or are at risk for alcohol-related problems such as poor class attendance, missed assignments, accidents, sexual assault, and violence.</p> <p>Students often conform to patterns of heavy drinking they see as acceptable while holding false beliefs about alcohol's effects or actual alcohol-use norms. BASICS is designed to help students make better alcohol-use decisions. The program's style is empathetic, not confrontational or judgmental, and:</p> <ul style="list-style-type: none"> • Reduces alcohol consumption and its adverse consequences • Promotes healthier choices among young adults • Provides important information and coping skills for risk reduction <p>BASICS is conducted over the course of only two interviews, and these brief, limited interventions prompt students to change their drinking patterns. While research also shows that, over time, the majority of students who drink heavily will reduce consumption without the intervention, BASICS speeds the process. BASICS is designed to affect the individual; however, post-intervention students often comment that they respond differently to friends as a result of participation. Thus, if implemented densely (e.g., dormitory or other residential settings), BASICS may have a broader effect.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p>	<p>G. Alan Marlatt, Ph.D. Addictive Behaviors Research Center Department of Psychology University of Washington Box 351525 Seattle, WA 98195 Phone: (206) 685-1395 Fax: (206) 685-1310 Email: marlatt@u.washington.edu</p> <p>John S. Baer Research Associate Professor Department of Psychology University of Washington 1600 S. Columbia Way Seattle, WA 98108 Phone: (206) 768-5224 Fax: (206) 764-2293 Email: jsbaer@u.washington.edu</p>	18-24	Male and Female	Multiple Ethnic Groups	Suburban and Urban college campuses	<ul style="list-style-type: none"> • Report fewer negative consequences of alcohol use 	<ul style="list-style-type: none"> • Promotes healthier choices among young adults • Provides important information and coping skills for risk reduction • Reduce alcohol consumption and its adverse consequences 	<p>Training</p> <ul style="list-style-type: none"> • Developers of BASICS provide onsite and offsite training • Please contact program developer for cost <p>Materials</p> <ul style="list-style-type: none"> • N/A
<p><u>Brief Strategic Family Therapy (BSFT)</u></p> <p>Indicated</p>	<p>Brief Strategic Family Therapy (BSFT) is an effective, problem-focused, and practical approach to the elimination of substance abuse risk factors. It successfully reduces problem behaviors in children and adolescents, 6 to 17 years, and strengthens their families. BSFT provides families with tools to decrease individual and family risk factors through focused interventions that improve problematic family relations and skill building strategies that strengthen families. It targets:</p>	<p>José Szapocznik, Ph.D. Center for Family Studies, Department of Psychiatry and Behavioral Sciences University of Miami 1425 N.W. 10th Avenue Miami, FL 33136 Phone: (305) 243-8217 Fax: (305) 243-5577 Email: Jszapocz@med.miami.edu Web site: www.cfs.med.miami.edu</p> <p>Olga E. Hervis, M.S.W., L.C.S.W.</p>	6-17	Male and Female	African American and Hispanic/Latino	Rural, Suburban, and Urban homes, community social service agencies, clinics, and health agencies	<ul style="list-style-type: none"> • Reduced conduct problems • Improved self-concept • Reduced association with antisocial peers • Improved family 	<ul style="list-style-type: none"> • Engage resistant clients in therapy • Diagnose strengths and weaknesses in family functioning • Enhance strengths and correct weaknesses • Build parenting skills • Improve family communication, 	<p>Training:</p> <ul style="list-style-type: none"> • Available in English or Spanish (length assessed by BSFT counselors) • \$2,000 per day, plus expenses for up to 30 participants <p>Materials:</p> <ul style="list-style-type: none"> • BSFT manual published by NIDA Spring 2002 • Books: Kurtines,

	<ul style="list-style-type: none"> • Conduct problems • Associations with anti-social peers • Early substance use • Problematic family relations <p>The program fosters parental leadership, appropriate parental involvement, mutual support among parenting figures, family communication, problem solving, clear rules and consequences, nurturing, and shared responsibility for family problems. In addition, the program provides specialized outreach strategies to bring families into therapy.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Presidential Award: Society for Prevention Research</p> <p>Research Award: Center for Substance Abuse Prevention</p>	<p>Center for Family Studies University of Miami School of Medicine 1425 N.W. 10th Avenue Miami, FL 33136 Phone: (305) 243-7585 Fax: (305) 243-2320 Email: OHervis@med.miami.edu Web site: www.cfs.med.miami.edu</p>					<p>functioning and family participation in therapy</p> <ul style="list-style-type: none"> • Reduced drug use 	<p>conflict resolution, and problem solving skills</p> <ul style="list-style-type: none"> • Provide home-based services 	<p>William, and Szapocznik, Jose. <i>Breakthroughs in Family Therapy with Drug Abusing and Problem Youth</i></p>
<p>CASASTART</p> <p>Selective Indicated</p>	<p>CASASTART (Striving Together to Achieve Rewarding Tomorrows) is a community-based, school-centered program designed to keep high-risk preadolescents (8 to 13 years old) free of drug and crime involvement. The central notion underlying the program is that while rates of experimentation with drugs and alcohol are similar for preadolescents from all backgrounds, those who lack effective human and social support are at higher risk of continuing and intensifying substance abuse.</p> <p>Using an intensive and coordinated marriage of preventive services and community-based law enforcement, CASASTART addresses the individual needs of participants as well as the broader problems of their families and communities. It operates on three levels to:</p> <ul style="list-style-type: none"> • Build resiliency in the child • Strengthen families • Make neighborhoods safer for children and their families <p>The program brings together key stakeholders in a community or neighborhood (schools, law enforcement, social services, and health agencies) under one umbrella and provides case managers to</p>	<p>Lawrence Murray, CSW CASA Fellow National Center on Addiction and Substance Abuse at Columbia University 633 Third Avenue, 19th Floor New York, NY 10017 Phone: (212) 841-5208 Fax: (212) 956-8020 Email: lmurray@casacolumbia.org Web site: www.casacolumbia.org</p>	8-13	Male and Female	African American, Hispanic/Latino, and White	Rural, Suburban, and Urban schools and communities	<ul style="list-style-type: none"> • Reduced students reports of using gateway and stronger drugs • Reduced association with delinquent peers and violent offenses • Increased positive peer influence 	<ul style="list-style-type: none"> • Improve youths attachment to prosocial individuals and institutions • Increase youths opportunities to achieve positive goals • Provide parent education/training 	<p>Training:</p> <ul style="list-style-type: none"> • \$1,300 per day for 6 days training in core program elements, plus expenses <p>Materials</p> <ul style="list-style-type: none"> • CASASTART field guide: \$50 • CASASTART Mission History: \$4.25 • Final Report II of Impact of the Children at Risk Program (CASASTART was formerly Children at Risk), May 1998: \$15 • Final Report of Impact of the Children at Risk Program, Volumes I and II, March 1997: \$17.50

	<p>work daily with high-risk children.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Exemplary Program: Safe and Drug Free Schools Program, U.S. Department of Education</p> <p>Model Program: Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice</p> <p>Promising Program: U.S. Surgeon General's Report on Youth Violence</p> <p><i>CASASTART was developed by The National Center on Addiction and Substance Abuse (CASA) at Columbia University. CASA is neither affiliated with, nor sponsored by, the National Court Appointed Special Advocate Association (also known as "CASA") or any of its member organizations, or any other organization with the name of "CASA."</i></p>								
<p>Challenging College Alcohol Abuse</p> <p>Universal Indicated</p>	<p>Challenging College Alcohol Abuse (CCAA) is a social norms and environmental management program that reduces high-risk drinking and related negative consequences in college students (18 to 24 years old). Under CCAA, the campus health service uses new and innovative methods to communicate public health information to students, the campus community, and the surrounding community to:</p> <ul style="list-style-type: none"> • Correct misperceptions, increase knowledge, and change attitudes about alcohol and drug use behaviors among undergraduate students • Change policies and practices related to alcohol and drug use and abuse among campus fraternity and sorority chapters • Change faculty, administration, parental, community, and policymaker perceptions to prevent perpetuation of alcohol and drug myths • Increase restrictions on alcohol availability and monitor on- and off-campus distribution and consumption <p>CCAA fosters development of policies that establish and maintain a healthy and safe environment for all students. It also seeks to develop community and civic partnerships and collaborations in support of campus alcohol and</p>	<p>Koreen Johannessen Campus Health Service University of Arizona P.O. Box 210021 Old Main 200W Tucson, AZ 85721-0021 Phone: (520) 571-7849 Email: koreen@dakotacom.net Web site: www.socialnorms.campus-health.net</p>	18–24 and parents	Male and Female	African American American Indian/Alaskan Native Asian American Hispanic/Latino Native Hawaiian and Other Pacific Islander (NHOPI) White	Rural, Suburban, and Urban college and university campuses and communities	<ul style="list-style-type: none"> • Reduced negative consequences of alcohol and illegal drug use • Decreased positive perceptions of alcohol use • Reduction in alcohol and illegal drug-related crimes • More accurate perception of students alcohol and illegal drug use • More accurate perception of negative consequences 	<ul style="list-style-type: none"> • Social norms media marketing campaign • Environmental management • Moderation skills training • Alcohol-specific prevention program 	<p>Training:</p> <ul style="list-style-type: none"> • Requires consultation and school assessment • Requires training on social marketing techniques, materials development, and social norms theory • Costs: TBA <p>Materials:</p> <ul style="list-style-type: none"> • Varies according to market research and testing at a given school • Costs: TBA

	drug policies, and State and local laws.								
	Recognition Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services Alcohol and Other Drug Prevention Model Program Award: U.S. Department of Education								
Child Development Project (CDP) Universal	<p>The Child Development Project (CDP) is a multifaceted, schoolwide improvement program that helps elementary schools become "caring communities of learners" for their students (5 to 12 years old). CDP significantly reduces children's early use of alcohol and marijuana and their involvement in violence-related behavior. CDP is designed to strengthen connections among peers and between students of different ages, teachers and students, and home and school, in order to promote:</p> <ul style="list-style-type: none"> • School bonding: students commitment to, and engagement in, their school • Students interpersonal skills and commitment to positive values • Classroom and school-wide climate of safety, respect, caring, and helpfulness <p>The program, which involves students in all grade levels, their families, teachers, and school administrators, prepares children to play responsible roles in their classrooms and schools so that later they can contribute to the wider society. The program has recently been streamlined and strengthened to make it more feasible and affordable to implement, and more effective at boosting literacy skills.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Promising Safe and Drug Free Schools Program: U.S. Department of Education</p> <p>Educational Programs That Work: U.S. Department of Education</p>	<p>Eric Schaps, Ph.D. Developmental Studies Center 2000 Embarcadero, Suite 305 Oakland, CA 94606-5300 Phone: (800) 666-7270 Fax: (510) 464-3670 Email: info@devstu.org Web site: www.devstu.org/csrd/cdp_index.html</p> <p>Denise Wood Program Information Developmental Studies Center Oakland, CA 94606-5300 Phone: (800) 666-7270 ext. 239 Fax: (510) 464-3670 Email: info@devstu.org</p>	5-12	Male and Female	Multiple Ethnic Groups	Rural, Suburban, and Urban elementary schools	<ul style="list-style-type: none"> • Greater conflict resolution skills • Increased bonding to school 	<ul style="list-style-type: none"> • Bonding to school • Parent involvement • Peer bonding 	<p>Training:</p> <ul style="list-style-type: none"> • \$6,000 for teams from up to 5 schools <p>Materials:</p> <ul style="list-style-type: none"> • \$460 school set • \$60 per teacher • \$10 per 50 parent materials • Parental/take-home materials also available in Spanish.
Children in the Middle	<p>Children in the Middle is a skills-based program that helps children and parents deal with the</p>	<p>Donald A. Gordon, Ph.D Center for Divorce Education 340 W. State Street</p>	Parents and children 3-15	Male and Female	Asian American Hispanic/Latino	Rural and Urban settings in	<ul style="list-style-type: none"> • Decreased children's exposure to 	<ul style="list-style-type: none"> • Parents mandated to attend classes in their communities 	<p>Training:</p> <ul style="list-style-type: none"> • N/A

<p>Selective</p>	<p>children's reactions to divorce. Divorcing parents may use their children to manipulate and/or control each other around a variety of personal, social, and financial issues. These tactics increase the stress and anxiety typically experienced by children of divorce and can increase children's risk for behavior problems, depression, delinquency, substance use, teen pregnancy, school failure and dropout, and suicide. Built around a 37-minute video for parents and a 30-minute video for children, Children in the Middle needs no special training or licensing to implement, and seeks to alleviate children's problems such as</p> <ul style="list-style-type: none"> • Loss of concentration and attention • Declining grades and behavior problems at school • Withdrawal from friends • Emotional outbursts and health problems • Serious anger with one or both parents • Delinquency and substance use <p>The parent video teaches parents the skills needed to avoid putting children in the middle of their conflicts. The child video helps children understand why parents divorce. It dispels common myths that children have about divorce (e.g., "It's my fault" or "I can get my parents back together") and teaches children stress and anger management and problem-solving skills. The parent video is available open-captioned or in Spanish.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Positive Parenting Award: Children's Rights Council</p>	<p>Room 135C, Unit 8 Athens, OH 4570145701 Phone: (740) 593-9505; Toll Free: 1(866) 234-WISE Fax: (541) 482-2829 Email: gordon@ohio.edu Web site: www.divorce-education.com/</p>			<p>Native Hawaiian and Other Pacific Islander (NHOPI) White</p>	<p>schools, social service agencies, community colleges</p>	<p>parental conflict</p> <ul style="list-style-type: none"> • Decreased stress children experienced • Increased parental communication skills 	<ul style="list-style-type: none"> • One or two 90- to 120-minute class sessions are typical • The 37-minute <i>Children in the Middle</i> video shown in first class • Workbook exercises and role-plays give parents a chance to practice new skills • Children's programs may be held at school, mental health practitioner, or in groups at social service agencies. • Parents and children view 30-minute child-focused video together • Parents and children complete workbook exercises at home or at practitioner's office with guidance from the practitioner • Family counselor incorporates materials into a treatment plan consisting of 4 to 10 sessions over 2 to 4 months. • Parents given <i>What About the Children</i> booklet and <i>Parents and Children's Guidebook</i> to study and complete exercises at home. 	<p>Materials:</p> <ul style="list-style-type: none"> • N/A
<p>Cognitive Behavioral Therapy for Child Sexual Abuse (CBT-CSA)</p> <p>Selective Indicated</p>	<p>Cognitive Behavioral Therapy for Child Sexual Abuse (CBT-CSA) is a treatment approach designed to help children and adolescents who have suffered sexual abuse overcome posttraumatic stress disorder (PTSD), depression, and other behavioral and emotional difficulties. The program helps children to:</p> <ul style="list-style-type: none"> • Learn about child sexual abuse as well as healthy sexuality • Therapeutically process traumatic 	<p>Esther Deblinger, Ph.D. Clinical Director Center for Children Support University of Medicine and Dentistry of NJ School of Osteopathic Medicine 42 East Laurel Road, Suite 1100B Stratford, NJ 08084 Phone: (856) 566-7036 Fax: (856) 655-6108 Email: deblines@umdnj.edu Web site: www.hope4families.com</p>	<p>3-18</p>	<p>Male and Female</p>	<p>African American, Hispanic/Latino, and White</p>	<p>Rural, Suburban, and Urban in public and private clinics and community settings</p>	<ul style="list-style-type: none"> • Greater improvements with respect to PTSD, depression, and acting out behaviors as compared to children assigned to the 	<ul style="list-style-type: none"> • Education about child sexual abuse and healthy sexuality • Coping skills training, including relaxation, emotional expression, and cognitive coping • Gradual exposure and processing of 	<p>Training:</p> <ul style="list-style-type: none"> • N/A <p>Materials:</p> <ul style="list-style-type: none"> • N/A

	<p>memories</p> <ul style="list-style-type: none"> • Overcome problematic thoughts, feelings, and behaviors • Develop effective coping and body safety skills <p>The program emphasizes the support and involvement of nonoffending parents or primary caretakers and encourages effective parent–child communication. Cognitive behavioral methods are used to help parents learn to cope with their own distress and respond effectively to their children's behavioral difficulties. This CBT approach is suitable for all clinical and community–based mental health settings and its effectiveness has been documented for both individual and group therapy formats.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p>						<p>community control condition.</p> <ul style="list-style-type: none"> • Parents who participated in a CBT–CSA group showed greater improvement with respect to emotional distress and intrusive thoughts related to their children's sexual abuse. 	<p>traumatic memories and reminders</p> <ul style="list-style-type: none"> • Personal body safety skills training 	
<p>Communities Mobilizing for Change on Alcohol (CMCA)</p> <p>Universal</p>	<p>Communities Mobilizing for Change on Alcohol (CMCA) is a community–organizing program designed to reduce adolescent (13 to 20 years old) access to alcohol by changing community policies and practices. Initiated in 1991, CMCA has proven that effectively limiting the access to alcohol to people under the legal drinking age not only directly reduces teen drinking, but also communicates a clear message to the community that underage drinking is inappropriate and unacceptable.</p> <p>CMCA employs a range of social organizing techniques to address legal, institutional, social, and health issues in order to reduce youth alcohol use by eliminating illegal alcohol sales to youth by retailers and obstructing the provision of alcohol to youth by adults.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p>	<p>Alexander C. Wagenaar, Ph.D. Alcohol Epidemiology Program, Community Health Education University of Minnesota 1300 South Second Street, Suite 300 Minneapolis, MN 55454–1015 Phone: (612) 624–8370 Fax: (612) 624–0315 Email: wagenaar@epi.umn.edu Web site: www.epi.umn.edu/alcohol/</p> <p>Becky Mitchell Coordinator Alcohol Epidemiology Program, Community Health Education University of Minnesota</p>	13–20	Male and Female	Multiple Ethnic Groups	Rural, Suburban, and Urban communities	<ul style="list-style-type: none"> • Reduction in sales to minors • Reduction in sales to minors • Increased identification checks by vendors • Increased identification checks by vendors • Community mobilization 	<ul style="list-style-type: none"> • Environmental strategy • Limit minors access to alcohol through community mobilization 	<p>Training:</p> <ul style="list-style-type: none"> • No official training <p>Materials:</p> <ul style="list-style-type: none"> • No formal curriculum
<p>Community Trials Intervention to Reduce High–Risk</p>	<p>Community Trials to Reduce High–Risk Drinking (RHRD) is a multicomponent, community–based program developed to alter alcohol use patterns of people of all ages (e.g., drinking and driving,</p>	<p>Harold D. Holder, Ph.D. Director Prevention Research Center 2150 Shattuck Avenue, Suite 900 Berkeley, CA 94704</p>	All age groups within a community	Male and Female	Multiple Ethnic Groups	Rural, Suburban, and Urban communities	<ul style="list-style-type: none"> • Reduced driving when over the legal limit 	<ul style="list-style-type: none"> • Community mobilization to support prevention interventions • Facilitating 	<p>Training:</p> <ul style="list-style-type: none"> • Initial telephone consultation provided at no charge. • Costs for additional

Drinking (RHRD)	<p>underage drinking, acute (binge) drinking), and related problems. The program uses a set of environmental interventions including:</p> <ul style="list-style-type: none"> • Community awareness • Responsible Beverage Service (RBS) • Preventing underage alcohol access • Enforcement • Community mobilization <p>The program's aim is help communities reduce various types of alcohol-related accidents, violence, and resulting injuries.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p>	<p>Phone: (510) 486-1111 Fax: (510) 644-0594 Web site: www.PREV.org</p> <p>Andrew J. Treno, Ph.D. Prevention Research Center Phone: (510) 486-1111 ext. 139 Fax: (515) 644-0594 (fax) Email: andrew@prev.org</p>					<ul style="list-style-type: none"> • Reduced amount consumed per drinking occasion • Reduced traffic crashes in which driver had been drinking • Reduced assault injuries 	<p>responsive beverage service</p> <ul style="list-style-type: none"> • Training local retailers and increasing enforcement to reduce underage access • Increase enforcement and sobriety checkpoints to increase actual and perceived risk of arrest • Develop local restrictions on access via zoning and other controls 	<p>technical assistance, if needed, is negotiated.</p> <p>Materials:</p> <ul style="list-style-type: none"> • Materials provided at reproduction cost. • Materials also available in Spanish.
Coping with Work and Family Stress	<p>Coping With Work and Family Stress: A Workplace Preventive Intervention, is a 16-session weekly group intervention designed to teach employees how to develop and apply effective coping strategies to deal with stressors at work and at home. The program results in—</p> <ul style="list-style-type: none"> ♦ Actual reduction in work and family stressors ♦ Increased use of social support ♦ Changes in the meaning of stressful events ♦ Less reliance on avoidance coping strategies ♦ Increased use of a wider range of stress management approaches ♦ Prevention or reduction of alcohol and drug use ♦ Prevention or reduction of psychological symptoms such as depression and anxiety <p>Recognition</p> <p>Model Program—Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p>	<p>David L. Snow, Ph.D. The Consultation Center and Division of Prevention and Community Research Department of Psychiatry, Yale University 389 Whitney Avenue New Haven, CT 06511 Phone: 203-789-7645 Fax: 203-562-6355 Email: david.snow@yale.edu</p> <p>Susan O. Zimmerman, LCSW Division of Prevention and Community Research and The Consultation Center Department of Psychiatry Yale University Email: susan.zimmerman@yale.edu</p>	18-54	Male and Female	Multiple Ethnic Groups	Rural, Urban	<ul style="list-style-type: none"> • Significant reduction in work and family stressors • Significant increase in problem-solving and cognitive coping strategies • Significant reduction in the use of avoidance coping strategies • Significant increase in social support from supervisors and co-workers • Significant reduction in the use of alcohol and other drugs • Significant reduction in depression, anxiety, and 	<ul style="list-style-type: none"> • Release time provided by companies allowing consistent participation of employees • Teach methods to potentially eliminate or modify sources of stress • Teach techniques that help to modify cognitive and appraisal processes that lead to stress • Stress management • Reducing the use of avoidance coping and other negative tension-reducing behaviors • Develop personalized stress management plans 	<p>Training:</p> <ul style="list-style-type: none"> • N/A <p>Materials:</p> <ul style="list-style-type: none"> • N/A

							somatic complaints		
<p><u>Creating Lasting Family Connections (CLFC)</u></p> <p>Universal Selective Indicated</p>	<p>Creating Lasting Family Connections (CLFC) is a comprehensive family strengthening, substance abuse, and violence prevention curriculum that has scientifically demonstrated that youth and families in high-risk environments can be assisted to become strong, healthy, and supportive people. Program results, documented with children 11 to 15 years, have shown significant increases in children's resistance to the onset of substance use and reduction in use of alcohol and other drugs. CLFC provides parents and children with strong defenses against environmental risk factors by teaching appropriate skills for personal growth, family enhancement, and interpersonal communication, including refusal skills for both parents and youth.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Model Family Strengthening Program: Office of Juvenile Justice and Delinquency Prevention</p> <p>Promising Program: U.S. Department of Education</p> <p>Special Recognition Award: Office of National Drug Control Policy</p> <p>YouthNet Model Program: Selected for worldwide replication by the International Youth Foundation</p>	<p>Ted N. Strader, M.S. Council on Prevention and Education: Substances, Inc. (COPES) 845 Barret Avenue Louisville, KY 40204 Phone: (502) 583-6820 Fax: (502) 583-6832 Email: tstrader@sprynet.com Web site: www.copes.org/include/clfc.htm</p>	11-15 and parents	Male and Female	African American American Indian/Alaskan Native Asian American Hispanic/Latino Native Hawaiian and Other Pacific Islander (NHOPi) White	Rural, Suburban, and Urban community centers, churches, and schools	<ul style="list-style-type: none"> Increased child resiliency Increased involvement in setting family norms on substance abuse Delayed onset of substance use 	<ul style="list-style-type: none"> Alcohol and drug information Parenting skills Communication skills 	<p>Training:</p> <ul style="list-style-type: none"> \$750 per person, plus expenses for 5 days \$1,500 per person, plus expenses for 10 days <p>Materials:</p> <ul style="list-style-type: none"> \$1,125 for 6 training manuals, 150 participant notebooks, and 6 poster sets Materials also available in Spanish at the same cost.
<p><u>DARE To Be You (DTBY)</u></p> <p>Universal Selective</p>	<p>DARE To Be You (DTBY) is a multilevel, primary prevention program for children 2 to 5 years old and their families. It significantly lowers the risk of future substance abuse and other high-risk activities by dramatically improving parent and child protective factors in the areas of communication, problem solving, self-esteem, and family skills. Program interventions are designed to:</p> <ul style="list-style-type: none"> Improve parents' sense of competence and satisfaction with being a parent Provide parents with knowledge and understanding of appropriate child management strategies Improve parents' and children's 	<p>Jan Miller-Heyl, M.S. Colorado State University Cooperative Extension 215 N. Linden Cortez, CO 81321 Phone: (970) 565-3606 Fax: (970) 565-4641 Email: darecort@coop.ext.colostate.edu Web site: www.coopext.colostate.edu/DTBY/</p>	2-5 and parents	Male and Female	African American American Indian/Alaskan Native Asian American Hispanic/Latino Native Hawaiian and Other Pacific Islander (NHOPi) White	Rural, Suburban, and Urban community centers and pre-schools	<ul style="list-style-type: none"> Increased parent efficacy Decreased use of harsh punishment Increased child development skills 	<ul style="list-style-type: none"> Parenting skills Youth coping skills 	<p>Training:</p> <ul style="list-style-type: none"> \$3,000 for up to 40 participants (this includes materials) <p>Materials:</p> <ul style="list-style-type: none"> \$46 community leader manual \$150 set of K-12 school curriculum \$32 parent training guide \$32 pre-school activity guide \$60 parent and pre-school training set \$45 Spanish/English

	<div>relationships with their families and peers</div> <div><ul style="list-style-type: none">• Boost children's developmental levels</div> <div>DTBY program materials are available in English and Spanish.</div> <div>Recognition</div> <div>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</div> <div>Exemplary Program: National Association of State Alcohol and Drug Abuse Directors and the National Prevention Network</div> <div>Building Human Capital Award: U.S. Department of Agriculture</div> <div>Distinguished Service Award: Cooperative Extension Service</div> <div>Excellence in Prevention: Colorado Governor's Award</div> <div>Champion for Children and Families, Individual Award: Colorado Mothers, Inc.</div>								<div>dition parent training guide</div> <div><ul style="list-style-type: none">• Other guides and supplemental materials are available</div>
<div>Early Risers</div> <div>Skills for Success</div> <div>Indicated</div>	<div>Early Risers is a multicomponent, high intensity, competency enhancement program that targets elementary school children (6 to 10 years old) who are at high risk for early development of conduct problems, including substance use. Early Risers is based on the premise that early, comprehensive, and sustained intervention is necessary to target multiple risk and protective factors. The program uses a full strength intervention model with two complementary components to move high-risk children onto a more adaptive developmental pathway. Interventions include:</div> <div><ul style="list-style-type: none">• Child social skills training and strategic peer involvement• Reading and math instruction and educational enrichment activities• Parent education and skills training• Family support, consultation, and brief interventions to cope with stress• Proactive parent-school consultation• Contingency management of aggressive, disruptive, and noncompliant behavior</div>	<div>Gerald J. August, Ph.D.</div> <div>University of Minnesota</div> <div>F256/2B West</div> <div>2450 Riverside Avenue</div> <div>Minneapolis, MN 55454-1495</div> <div>Phone: (612) 273-9711</div> <div>Fax: (612) 273-9779</div> <div>Email: augus001@tc.umn.edu</div>	6-10 and parents	Male and Female	African American White	Rural and Urban schools and community centers	<div><ul style="list-style-type: none">• Improved social skills and academic achievement• Increased parent involvement• Reduced impulsive behaviors</div>	<div><ul style="list-style-type: none">• Information dissemination• Prevention education• Problem identification and referral</div>	<div>Training:</div> <div><ul style="list-style-type: none">• N/A</div> <div>Materials:</div> <div><ul style="list-style-type: none">• Program costs \$1,500 to \$3,200 per year for one child</div>

	<p>The enhanced competence gained through the Early Risers program leads to the development of positive self-image, independent decisionmaking, healthy problem solving, assertive communication, and constructive coping. Once acquired, these attributes and skills collectively enable youth to resist personal and social forces that encourage early substance use and potential abuse and dependency.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p>								
<p>Families And Schools Together (FAST)</p> <p>Universal Selective Indicated</p>	<p>Families and Schools Together (FAST) is a multifamily group intervention designed to build protective factors and reduce the risk factors associated with substance abuse and related problem behaviors for children 4 to 12 years old and their parents. FAST systematically applies research on family stress theory, family systems theory, social ecological theory, and community development strategies to achieve its four goals:</p> <ul style="list-style-type: none"> • Enhanced family functioning • Prevention of school failure by the targeted child • Prevention of substance abuse by the child and other family members • Reduced stress from daily life situations for parents and children <p>One of the primary strategies of FAST is parent empowerment: parents receive support to be the primary prevention agents for their own children. Entire families participate in program activities that are designed to build parental respect in children, improve intra-family bonds, and enhance the family-school relationship. FAST activities were developed to build the social capital of parents and provide a safe place to practice parenting. As a result of this program, the participating children increase their social skills and attention span, while reducing their anxiety and aggression. Research has shown that these childhood behavioral outcomes are correlated in adolescence to the prevention of substance abuse, delinquency, and school failure.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Service Administration, U.S. Department of Health and Human Services</p>	<p>Lynn McDonald, Ph.D., M.S.W. Wisconsin Center for Education Research University of Wisconsin-Madison 1025 W. Johnson Street Madison, WI 53706 Phone: (608) 263-9476 Fax: (608) 253-6338 Email: mrmcdona@facstaff.wisc.edu Web site: www.wcer.wisc.edu/fast</p> <p>Ms. Pat Davenport CEO FAST National Training Center 2801 International Training Center Madison, WI 53704 Phone: (608) 663-2382 Fax: (608) 663-2336 Email: fast@chorus.net Web site: www.wcer.wisc.edu/fast/</p>	4-12 and parents/families	Male and Female	African American American Indian/Alaskan Native Asian American Hispanic/Latino Native Hawaiian and Other Pacific Islander (NHOPI) White	Rural, Suburban, and Urban schools	<ul style="list-style-type: none"> • Improved child classroom and home behaviors, including improved attention span, reduced aggression, reduced anxiety/depression, improved social skills • Improved academic competence performance • Increased family closeness community involvement • Increased parental involvement in school parental self-sufficiency 	<ul style="list-style-type: none"> • Outreach • Multifamily group sessions • Ongoing monthly multi-family reunions • Social skills • Family/parent-child bonding • Family/parent-school bonding 	<p>Training:</p> <ul style="list-style-type: none"> • \$3,900 (includes TA) • Plus \$1,000 for evaluation <p>Implementation Costs:</p> <ul style="list-style-type: none"> • Vary from \$300-\$2,000 per family, largely depending on staffing

	<p>Family Strengthening Program: Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice</p> <p>School Reform Model: Office of Education for At-Risk Students, U.S. Department of Education</p> <p>Innovation in Government (finalist): Harvard School of Government and Ford Foundation</p>								
<p>Family Effectiveness Training (FET)</p> <p>Indicated</p>	<p>Family Effectiveness Training (FET) is a family-based program developed for and targeted to Hispanics. It is effective in reducing risk factors and increasing protective factors for adolescent substance abuse and related disruptive behaviors. FET, applied in the pre-adolescent years (6 to 12), targets three family factors that place children at risk as they make the transition to adolescence: 1) problems in family functioning, 2) parent-child conflicts, and 3) cultural conflicts between children and parents.</p> <p>FET uses two primary strategies:</p> <ol style="list-style-type: none"> 1. Didactic lessons and participatory activities that help parents master effective family management skills 2. Planned family discussions in which the therapist/facilitator intervenes to correct dysfunctional communications between or among family members <p>Interventions employed by FET cover:</p> <ul style="list-style-type: none"> • Normal family changes during the transition to adolescence and related conflict resolution • Substance use and adolescent alternatives to using • Parent and family supervision of children and their peer relationships • Family communication and parenting skills <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Presidential Award: Society for Prevention Research</p>	<p>José Szapocznik, Ph.D. Spanish Family Guidance Center Center for Family Studies Department of Psychiatry Behavior 1425 N.W. 10th Avenue Miami, FL 33136 Phone: (305) 243-8217 Fax: (305) 243-5577 Email: Jsapocz@med.miami.edu Web site: www.cfs.med.miami.edu</p> <p>Olga E. Hervis, MSW, LCSW Center for Family Studies University of Miami School of Medicine 1425 N.W. 10th Avenue Miami, FL 33136 Phone: (305) 243-7585 Fax: (305) 243-2320 Email: OHervis@med.miami.edu Web site: www.cfs.med.miami.edu</p>	Families with children 6-12	Male and Female	Hispanic/Latino	Suburban and Urban community agencies, schools, clinics, churches, youth centers	<ul style="list-style-type: none"> • Reduction in child conduct problems • Reduction in child associations with antisocial peers • Reduction in child irresponsible behaviors • Improvement in child self-concept • Improvement in family functioning 	<ul style="list-style-type: none"> • Effective parenting skills • Family communication and problem solving skills • Family development • Bicultural effectiveness training • Brief strategic family therapy 	<p>Training:</p> <ul style="list-style-type: none"> • A second training would focus on troubleshooting <p>Materials:</p> <ul style="list-style-type: none"> • \$18,000 includes training and supervision

	Research Award: Center for Substance Abuse Prevention								
<u>Family Matters</u> Universal	<p>Family Matters is a home-based program designed to prevent tobacco and alcohol use in children 12 to 14 years old. The program is delivered through four booklets mailed to the home and follow-up telephone calls to parents by health educators. The booklets contain readings and activities designed to get families to consider general family characteristics and family tobacco- and alcohol-use attitudes and characteristics that can influence adolescent substance use, including:</p> <ul style="list-style-type: none"> ◆ Adult supervision and support ◆ Rule-setting and monitoring ◆ Family communication, attachment, and time together ◆ Education encouragement ◆ Family/adult substance use ◆ Substance availability ◆ Peer attitudes and media orientation toward substance use <p>Designed for use with any family in which at least one adult can read English, Family Matters requires a modest time effort from participants and is capable of broad dissemination by many types of organizations.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p>	<p>Karl Bauman N/A 513 Dogwood Drive Chapel Hill, NC 27516 Phone: please contact via e-mail Email: kbauman@mindspring.com</p>	12-14 and parents/families	Male and Female	African American White	Rural and Urban settings in homes	<ul style="list-style-type: none"> • Reduced prevalence of adolescent cigarette smoking and alcohol use for non-Hispanic White adolescents 	<ul style="list-style-type: none"> • Provide alcohol and drug information • Develop resistance skills • Provide parent training • Develop family strengths 	<p>Training:</p> <ul style="list-style-type: none"> • N/A <p>Materials:</p> <ul style="list-style-type: none"> • N/A
<u>Guiding Good Choices (GGC)</u> Universal	<p>Families That CareGood Choices (GGC) is a multimedia program that gives parents of children in grades four through eight (8 to 13 years old) the knowledge and skills needed to guide their children through early adolescence. Over the last 20 years, research has shown that positive parental involvement is an important protective factor that increases school success and buffers children against later problems such as substance abuse, violence, and risky sexual behaviors. This program aims to:</p> <ul style="list-style-type: none"> • Strengthen and clarify family expectations for behavior • Enhance the conditions that promote bonding in the family 	<p>Richard Catalano, Ph.D. Program Contact Channing Bete Company One Community Place South Deerfield, MA 01373 Phone: (877) 896-8532 Fax: (800) 499-6464 Email: PrevSci@channing-bete.com Web site: www.preventionscience.com/FTC/GGC.html</p> <p>J. David Hawkins, Ph.D. Ask for the Prevention Science Customer Service Representative</p> <p>Program Background or training: Ask for the Prevention Science</p>	Parents of children 8 to 13	Male and Female	African American American Indian/Alaska Native Asian American Hispanic/Latino Native Hawaiian and Other Pacific Islander (NHOPI) White	Rural, Suburban, and Urban schools, communities, and others	<ul style="list-style-type: none"> • Prevent teen alcohol, tobacco, and illegal drug use • Build family bonding • Teach refusal skills • Teach parenting skills to reduce risk factors in their families • Strengthen 	<ul style="list-style-type: none"> • Social Development Strategy • Begin with healthy beliefs and clear standards in families, schools, communities, and peer groups • Build bonding, attachment, and commitment by providing opportunities, skills, and recognition while nurturing individual characteristics 	<p>Training:</p> <ul style="list-style-type: none"> • \$4,750 (plus trainer expenses) for up to 12 people, plus \$105 materials fee per person <p>Materials:</p> <ul style="list-style-type: none"> • \$729 for 1-9 Curriculum Kits • \$12 each for 1-9 Family Guides • Discounts are provided for large orders.

	<ul style="list-style-type: none"> Teach skills to parents and children that allow children to successfully meet the expectations of their family to resist drug use <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Programs That Work: National Institute on Drug Abuse, National Institutes of Health, U.S. Department of Health and Human Services</p> <p>Promising Program: Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice</p> <p>Promising Program: U.S. Department of Education</p>	Account Manager					family bonding in parents		
<p>Healthy Workplace</p> <p>Universal</p>	<p>The Healthy Workplace program is a set of workplace substance abuse prevention interventions that reduce unsafe drinking, illegal drug use, and prescription drug abuse while improving the health practices of adult workers. Cast in a health promotion framework and rooted in social-cognitive principles of behavior change, the program integrates substance abuse prevention material into popular health promotion programs, defusing the stigma that accompanies substance abuse, thus removing barriers to help-seeking behavior. The Healthy Workplace program achieves results because it:</p> <ul style="list-style-type: none"> Reaches the mainstream of workers through the positive vehicle of health promotion Raises awareness of the benefits of healthful practices and the hazards of using alcohol, tobacco, and illegal drugs, and misusing legal drugs Teaches employees specific techniques for improving health and reducing use of alcohol, tobacco, and illegal drugs Uses carefully constructed videos to raise self-efficacy and provide models for how healthful practices can be embraced and substance abuse reduced <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of</p>	<p>Royer F. Cook, Ph.D. President The ISA Group 201 North Union Street, Suite 330 Alexandria, VA 22314 Phone: 703-739-0880 Fax: 703-739-0462 Email: rcook@isagroup.com Web site: www.centerforworkforcehealth.com</p> <p>Rebekah Hersch, Ph.D. The ISA Group 201 North Union Street, Suite 330 Alexandria, VA 22314 Phone: (703) 739-0880 Fax: (703) 739-0462 Email: rhersch@isagroup.com Web site: www.centerforworkforcehealth.com</p>	18-55	Male and Female	African American Asian American Hispanic/Latino White	Urban and Suburban workplaces	<ul style="list-style-type: none"> Reduction in alcohol and drug use Improvements in other health measures, such as stress coping abilities and dietary practices 	<ul style="list-style-type: none"> To reach the mainstream of workers uses positive vehicle of health promotion Raises awareness of the benefits of healthful practices and the hazards of using alcohol, tobacco, and illegal drugs, and misusing legal drugs Teaches employees specific techniques for improving health and reducing use of alcohol, tobacco, and illegal drugs Uses videos to raise self-efficacy and provide models of healthful practices 	<p>Training</p> <ul style="list-style-type: none"> N/A <p>Materials</p> <ul style="list-style-type: none"> N/A

	Health and Human Services								
High/Scope Perry Preschool Program Universal	<p>The High/Scope Perry Preschool Program (High/Scope) utilizes an active learning approach to educating children, imparting skills that will support their development through school and into young adulthood. Based on more than 40 years of scientific research, it provides teachers and caregivers with a blueprint for daily routine, classroom and playground organization, and teacher–child interaction, all designed to create a warm, supportive learning environment. In addition, this learning environment encourages independent thinking, initiative, and creativity. High/Scope's goals are for young children to:</p> <ul style="list-style-type: none"> • Learn through active involvement with people, materials, events, and ideas • Become independent, responsible, and confident, ready for school and ready for life • Learn to plan and execute activities, then talk with other children and teachers about what they have done and what they have learned (Plan–Do–Review) • Gain knowledge and skills in important content areas including language and literacy, initiative and social relationships, creative representation, movement, music, mathematics, and logical thinking <p>Every day, the program offers one–on–one adult attention, assures children that they can choose interesting things to do, and gives children a sense of control over themselves and their surroundings.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Lela Rowland Prevention Award: National Mental Health Association</p> <p>Model Program: Adults and Children Together (ACT) Against Violence</p> <p>10 Best Preschools in America: Child Magazine (Demonstration Preschool)</p>	<p>David Weikart, Ph.D. High/Scope Educational Research Foundation 600 N. River Street Ypsilanti, MI 48198–2898 Phone: (734) 485–2000 Fax: (734) 485–0704 Email: info@highscope.org Web site: www.highscope.org</p> <p>Clay Shouse Director of Educational Services High/Scope Educational Research Foundation 600 N. River Street Ypsilanti, MI 48198–2898 Phone: (734) 485–2000 ext. 221 Fax: (734) 485–4467 Email: cshouse@highscope.org</p> <p>Kathy Woodard Director of Marketing Sales High/Scope Educational Research Foundation 600 N. River Street Ypsilanti, MI 48198–2898 Phone: (734) 485–2000 ext. 255 Fax: (734) 485–4467 Email: kwoodard@highscope.org</p>	3–5	Male and Female	African American American Indian/Alaskan Native American Asian American Hispanic/Latino Native Hawaiian and Other Pacific Islander (NHOPI) White	Rural, Suburban, and Urban preschools, nursery schools, Head Start programs, childcare centers, home–based childcare programs, and special needs programs	<ul style="list-style-type: none"> • Intervention children do significantly better throughout childhood and adulthood than comparison group 	<ul style="list-style-type: none"> • Implement High/Scope preschool curriculum • Introduce training methodology • Provide specialized two–part assessment system 	<p>Training:</p> <ul style="list-style-type: none"> • N/A <p>Materials:</p> <ul style="list-style-type: none"> • N/A

<p>Incredible Years</p> <p>Selective Indicated</p>	<p>The Incredible Years series features three comprehensive, multi-faceted, and developmentally based curricula for parents, teachers, and children. The program is designed to promote emotional and social competence and to prevent, reduce, and treat behavioral and emotional problems in young children (2 to 8 years old).</p> <p>Young children with high rates of aggressive behavioral problems have been shown to be at great risk for developing substance abuse problems, becoming involved with deviant peer groups, dropping out of school, and engaging in delinquency and violence. Ultimately the aim of the teacher, parent, and child training programs is to prevent and reduce the occurrence of aggressive and oppositional behavior, thus reducing the chance of developing later delinquent behaviors.</p> <p>Incredible Years addresses multiple risk factors known to be related to the development of conduct disorders in children in both school and home. In all three training programs, trained facilitators use videotaped scenes to structure the content and stimulate group discussion and problem solving.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Model Program: Office of Juvenile Justice and Delinquency Prevention</p> <p>U.S. Leila Rowland National Mental Health Award</p>	<p>Carolyn Webster–Stratton, Ph.D. Incredible Years 1411 8th Avenue West Seattle, WA 98119 Phone: (206) 285–7565 Fax: (206) 285–7565 Email: incredibleyears@seanet.com Web site: www.incredibleyears.com</p> <p>Lisa St. George Administrative Director Incredible Years Phone: Toll Free: 888–506–3562</p>	<p>Parents of children 2–8</p>	<p>Male and Female</p>	<p>African American Asian American Hispanic/Latino Native Hawaiian and Other Pacific Islander (NHOPI) White</p>	<p>Rural, Suburban, and Urban pre–schools and elementary schools</p>	<ul style="list-style-type: none"> • Reduced behavior problems • Increased prosocial behavior • Improved family relationships • Improved bonding to school 	<ul style="list-style-type: none"> • Improve communication skills • Limit setting • Nonviolent discipline techniques • Problem solving • Anger management • Parent, Teacher, and Child training groups 	<p>Training:</p> <ul style="list-style-type: none"> • \$1,300 per day, plus expenses; training in Seattle would be less <p>Materials:</p> <ul style="list-style-type: none"> • Prices vary • All four Basic Program parent training materials cost \$1,300 • Materials also available in Spanish.
<p>Keep A Clear Mind (KACM)</p> <p>Universal</p>	<p>Keep A Clear Mind (KACM) is a take–home drug education program for upper elementary school students (8 to 12 years old) and their parents. The take–home material consists of 4 weekly sets of activities to be completed by parents and their children together. The program also uses parent newsletters and incentives.</p> <p>KACM lessons are based on a social skills training model and designed to help children develop specific skills to refuse and avoid the use of "gateway" drugs. This unique, early intervention program has been shown to positively influence known risk factors for later substance use.</p> <p>Recognition</p>	<p>Chudley Werch, Ph.D., FAAHB Health Education Projects Office HP 326A University of Arkansas Fayetteville, AR 72701 Phone: (479) 575–5639 Fax: (479) 575–6401 Web site: www.keepaclearmind.com</p> <p>Michael Young Health Education Projects Office Phone: (479) 575–5639 Fax: (479) 575–6401 Email: mevyoung@comp.uark.edu</p>	<p>8–12</p>	<p>Male and Female</p>	<p>Multiple Ethnic Groups White</p>	<p>Rural, Suburban, and Urban schools and homes</p>	<ul style="list-style-type: none"> • Greater knowledge of effects of tobacco • Reduction in onset of substance use 	<ul style="list-style-type: none"> • Parent–child interaction • Alcohol and drug knowledge 	<p>Training:</p> <ul style="list-style-type: none"> • Although no formal training is required, an undergraduate degree (teacher training/certification) is required <p>Materials:</p> <ul style="list-style-type: none"> • \$3.95 per student • Materials available in Spanish. • Parental/take–home materials also available in Spanish.

	Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services								
keepin'it REAL	<p>The <i>keepin' it REAL</i> (Refuse, Explain, Avoid, Leave) program is a videoenhanced intervention that uses a culturally-grounded resiliency model which incorporates traditional ethnic values and practices that protect against drug use. A school-based prevention program for elementary, middle, and early high school students 10 through 17 years of age, keepin' it REAL is based on previous work that demonstrates that teaching communication and life skills can combat negative peer and other influences. keepin' it REAL extends resistance and life-skills models by using a culturally-based narrative and performance framework to:</p> <ul style="list-style-type: none"> • Enhance anti-drug norms and attitudes • Facilitate the development of risk assessment, decision-making, and resistance skills <p><i>keepin' it REAL</i> utilizes a 10-lesson classroom curriculum accompanied by a collection of five videos that demonstrate resistance strategies and illustrate the skills taught in the lessons.</p> <p>Recognition</p> <p>Model Program—Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p>	<p>Michael L. Hecht, Ph.D. Professor and Department Head Pennsylvania State University Department of Communication Arts and Sciences 234 Sparks Building University Park, PA 16802-5201 Phone: 814-865-3461 Fax: 517-863-7986 Email: mlh10@psu.edu Web site: http://cas.la.psu.edu/drsp/drsp.htm</p> <p>Flavio Francisco Marsiglia, Ph.D. Arizona State University AZ</p>	10-17	Male and Female	African American American Indian/Alaska Native Hispanic/Latino White	Urban settings in schools	<ul style="list-style-type: none"> • Better behavioral and psychosocial outcomes, including reduction and cessation of substance use, increased repertoire of resistance skills, more frequent use of those skills, and internalizing mediators of substance use such as highly developed and well-articulated personal anti-drug norms. • Significantly less substance use, especially alcohol. • Increased adoption of strategies to resist using alcohol, cigarettes, and marijuana. • Retention of unfavorable attitudes against someone their age using substances. 	<ul style="list-style-type: none"> • Skill development/ Substance abuse education • Behavior modification • Problem identification and referral • Booster sessions/ Media/Publicity campaigns • Social and Emotional Competence skill building 	<p>Training:</p> <ul style="list-style-type: none"> • N/A <p>Materials:</p> <ul style="list-style-type: none"> • N/A

							<ul style="list-style-type: none"> • Perception that their peers' increase in substance use experimentation was significantly less than previously believed • The curriculum develops and strengthens existing prosocial attitudes and behaviors, core resistance skills that are transferable to many other life situations 		
Leadership and Resiliency Program (LRP) Selective Indicated	<p>The Leadership and Resiliency Program (LRP) is a school- and community-based program for high school students (14 to 17 years of age) that works to enhance youths' internal strengths and resiliency, while preventing involvement in substance use and violence. Program components include:</p> <ul style="list-style-type: none"> • Resiliency Groups held at least weekly during the school day • Alternative Adventure Activities that include ropes courses, white water kayaking, camping, and hiking trips • Community Service in which participants are active in a number of community- and school-focused projects <p>These alternative activities, offered after school, on weekends, and during the summer, focus on community service, altruism, learning about managed risk, social skills improvement, and conflict resolution.</p> <p>Recognition</p>	<p>Laura Yager, M.Ed., LPC, CPP-ATOD Director Prevention Services, Alcohol and Drug Services Fairfax-Falls Church Community Services Board 3900 Jermantown Road, Suite 200 Fairfax, VA 22030 Phone: (703) 934-5476 Fax: (703) 934-8742 Email: Laura.Yager@fairfaxcountv.gov</p>	14-17	Male and Female	Multiple Ethnic Groups	Rural, Suburban, and Urban schools and communities	<ul style="list-style-type: none"> • Reduced absences and school disciplinary reports • Increased GPAs and graduation rates • Strengthened resiliency • Minimized impact of risk factors 	<ul style="list-style-type: none"> • Provide youth with access to a broad spectrum of activities • Weekly small group (7-10) meetings • After school volunteer options • Substance abuse and violence prevention 	<p>Training:</p> <ul style="list-style-type: none"> • \$3,200 plus transportation and lodging/meals • In addition, each locality will need to work with LRP staff to coordinate alternative activity training site and equipment. <p>Materials:</p> <ul style="list-style-type: none"> • Curriculum: available via e-mail (through a downloadable file): \$100 • Hard copy of Curriculum: \$150 (includes postage)

	<p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Best Practices in Science-Based Programming: Washington Metropolitan Council of Governments</p> <p>Achievement Award: National Association of Counties</p> <p>Governor's Recognition: Commonwealth of Virginia</p>								
<p>LifeSkills Training (LST)</p> <p>Universal</p>	<p>LifeSkills Training (LST) is a program that seeks to influence major social and psychological factors that promote the initiation and early use of substances. LifeSkills has distinct elementary (8 to 11 years old) and middle school (11 to 14 years old) curricula that are delivered in a series of classroom sessions over 3 years. The sessions use lecture, discussion, coaching, and practice to enhance students' self-esteem, feelings of self-efficacy, ability to make decisions, and ability to resist peer and media pressure.</p> <p>LST consists of three major components that address critical domains found to promote substance use. Research has shown that students who develop skills in these three domains are far less likely to engage in a wide range of high-risk behaviors. The three components each focus on a different set of skills:</p> <ul style="list-style-type: none"> • Drug Resistance Skills enable young people to recognize and challenge common misconceptions about substance use, as well as deal with peers and media pressure to engage in substance use. • Personal Self-Management Skills help students to examine their self-image and its effects on behavior, set goals and keep track of personal progress, identify everyday decisions and how they may be influenced by others, analyze problem situations, and consider the consequences of alternative solutions before making decisions. • General Social Skills give students the necessary skills to overcome shyness, communicate effectively and avoid misunderstandings, use both verbal and nonverbal assertiveness skills to make 	<p>Gilbert J. Botvin, Ph.D. National Health Promotion Associates, Inc. 711 Westchester Avenue White Plains, NY 10604 Phone: (800) 293-4969 or (914) 421-2525 Fax: (914) 683-6998 Email: LSTinfo@nhpanet.com Web site: www.lifeskillstraining.com</p> <p>Chris Williams National Health Promotion Associates, Inc.</p>	8-14	Male and Female	African American Asian American Hispanic/Latino White	Rural, Suburban, and Urban elementary and middle school	<ul style="list-style-type: none"> • Reductions in alcohol, tobacco, and illicit drug use 	<ul style="list-style-type: none"> • Life skills • Drug resistance skills • Social and self-management skills 	<p>Training:</p> <ul style="list-style-type: none"> • \$100 per day, per person (plus trainer expenses, if on-site training). Includes training folder, but not curriculum; should purchase materials prior and bring to training. Number of days varies with training type/level • Minimum of 20 participants required for on-site training • Trainings are posted at www.lifeskillstraining.com • To schedule training, call National Health Promotion Associates (NHPA) at 1-800-293-4969. <p>Materials:</p> <ul style="list-style-type: none"> • Pricing posted on web site. Can purchase individually or as classroom set. • To order LST materials, call Princeton Health Press at 1(800) 636-3415 • CD-Rom Middle School 101: Skills for Success

	<p>or refuse requests, and recognize that they have choices other than aggression or passivity when faced with tough situations.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Model Program: Centers for Disease Control and Prevention</p> <p>Model Program: Office of Juvenile Justice and Delinquency Prevention</p> <p>Model Program: White House Office of National Drug Control Policy</p> <p>Exemplary Program: U.S. Department of Education</p> <p>Programs That Work: National Institute on Drug Abuse</p>								
<p>Lions-Quest Skills for Adolescence</p> <p>Universal</p>	<p>Lions-Quest Skills for Adolescence (SFA) is a comprehensive positive youth development and prevention program designed for schoolwide and classroom implementation in grades six through eight (10 to 14 years old). It involves educators, parents, and community members to develop in young adolescents:</p> <ul style="list-style-type: none"> • Essential social and emotional competencies • Good citizenship skills • Strong, positive character • Skills and attitudes consistent with a drug-free lifestyle • An ethic of service to others within a caring and consistent environment <p>The classroom curriculum-based program may be delivered daily, two to three times per week, or weekly with equal effectiveness, depending on the implementation model (see How It Works). The learning model employs inquiry, presentation, discussion, group work, guided practice, and reflection to build positive social behaviors of self-discipline, responsibility, good judgment, and respect for self and others. It develops positive commitments to the family, school, peers, and community in young people. SFA supports social</p>	<p>Susan Keister, M.A. N/A</p> <p>Michael Buscemi, M.Ed. Program Development 1984-B Coffman Road Newark, OH 43055 Phone: (740) 522-6404 Fax: (740) 522-6580 Email: mikeb4kids@yahoo.com</p> <p>Program Information: Lions Quest P.O. Box 304 Annapolis Junction, MD 20701 Phone: (800) 446-2700 Fax: (240) 646-7023 Email: info@lions-quest.org Web site: www.lions-quest.org</p> <p>Mark Bularzik Manager LCIF Lions-Quest Department 300 W. 22nd Street Oak Brook, IL 60523 Phone: (630) 571-5466 ext. 650</p>	10-14	Male and Female	African American, Hispanic/Latino, and White	Rural, Suburban, and Urban middle schools	<ul style="list-style-type: none"> • Help deter initiation of regular cigarette smoking and experimental use of marijuana through end of seventh grade • Deter initiation and monthly use of alcohol and binge drinking for Hispanics/Latinos • Delay progression to regular cigarette smoking and experimental marijuana use among 	<ul style="list-style-type: none"> • Classroom curriculum • Parent and family involvement through shared assignments and direct involvement in school activities • Positive school climate by reinforcing curriculum themes through schoolwide events • Community involvement through participation in training workshops, school climate events, panel discussions, service projects, and parent meetings 	<p>Training:</p> <ul style="list-style-type: none"> • N/A <p>Materials:</p> <ul style="list-style-type: none"> • N/A

	<p>and emotional learning, drug prevention, service learning, and character education initiatives.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Promising Program: Safe and Drug Free Schools and Community Program, U.S. Department of Education</p> <p>Select Program: The Collaborative for Academic, Social and Emotional Learning (CASEL)</p>						students who had initiated regular alcohol use or binge drinking, but not regular cigarette smoking, by end of sixth grade		
<p>Multisystemic Therapy (MST)</p> <p>Indicated</p>	<p>Multisystemic Therapy (MST) is a family-oriented, home-based program that targets chronically violent, substance-abusing juvenile offenders 12 to 17 years old. It uses methods that promote positive social behavior and decrease antisocial behavior, including substance use, to change how youth function in their natural settings (i.e., home, school, and neighborhood). The primary goals of MST are to:</p> <ul style="list-style-type: none"> • Reduce youth criminal activity • Reduce antisocial behavior, including substance abuse • Achieve these outcomes at a cost savings by decreasing incarceration and out-of-home placement rates <p>Based on the philosophy that the most effective and ethical route to help youth is through helping their families, MST views parents or guardians as valuable resources, even when they have serious and multiple needs of their own. A "multisystemic" approach, however, views these youth as involved in a network of interconnected systems that encompass individual, family, and extra-familial (e.g., peer, school, neighborhood) factors, and recognizes that it is often necessary to intervene in more than one of these systems. MST addresses these factors in an individualized, comprehensive, and integrated manner.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Model Program: Office of Juvenile Justice and</p>	<p>Dr. Scott Henggeler, Ph.D. Family Services Research Center Department of Psychiatry and Behavioral Sciences Medical University of South Carolina 710 Johnnie Dodds Boulevard Charleston, SC 29425-0742</p> <p>Marshall Swenson, M.S.W., M.B.A. Manager of Program Development MST Services 710 Johnnie Dodds Boulevard Mt. Pleasant, SC 29464 Phone: (843) 856-8226, ext. 215 Fax: (843) 856-8227 Email: ms@mstservices.com Web site: www.mstservices.com/</p>	12-17	Male and Female	African American White	Rural, Suburban, and Urban homes	<ul style="list-style-type: none"> • Improved family relations • Decreased adolescent substance use • Reduced long-term rates of rearrest and out-of-home placement 	<ul style="list-style-type: none"> • Focus on comprehensive set of risk factors: individual, family, peer, school, and neighborhood determinants of substance use • A home-based model of service delivery • Intensive quality assurance 	<p>Training:</p> <ul style="list-style-type: none"> • \$4,000-\$8,000 per family (includes training, TA, and materials) • Upcoming trainings listed on web site at www.mstservices.com • Offered every month, 1-week long, in Charleston, SC. <p>Materials:</p> <ul style="list-style-type: none"> • Included in training cost • Note: <i>Overview video on MST available upon request</i>

	<p>Delinquency Prevention</p> <p>Effective Program: U.S. Surgeon General's Reports on Mental Health and Youth Violence</p> <p>Families Count Award: Annie E. Casey Foundation</p>								
<p>Nurse–Family Partnership (NFP)</p> <p>Selective Indicated</p>	<p>Nurse–Family Partnership (NFP) provides first–time, low–income mothers of any age with home visitation services from public health nurses. NFP nurses work intensively with these mothers to improve maternal, prenatal, and early childhood health and well being with the expectation that this intervention will help achieve long–term improvements in the lives of at–risk families. The intervention process is effective because it focuses on developing therapeutic relationships with the family and is designed to improve five broad domains of family functioning:</p> <ul style="list-style-type: none"> • Health (physical and mental) • Home and neighborhood environment • Family and friend support • Parental roles • Major life events (e.g., pregnancy planning, education, employment) <p>Starting with expectant mothers, the program addresses substance abuse and other behaviors that contribute to family poverty, subsequent pregnancies, poor maternal and infant outcomes, suboptimal childcare, and a lack of opportunities for the children.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Model Program: Office of Juvenile Justice and Delinquency Prevention</p>	<p>David Olds Site Development Specialist National Center for Children, Families and Communities 4200 E. 9th Avenue Box C288–13 Denver, CO 80218 Phone: 303–864–5839 Fax: 303–864–5236 Email: Buhr–Vogl.Matthew@tchden.org</p>	Low income first time mothers and their babies	Female Only	Multiple Ethnic Groups	Rural, Suburban, and Urban homes	<ul style="list-style-type: none"> • Reduced cigarette smoking during pregnancy • Reduced hospital emergency visits with detected injuries • Reduced rates of child maltreatment • Fewer subsequent births • Reduced maternal behavioral problems due to alcohol and drug abuse 	<ul style="list-style-type: none"> • Nurse home visitation • Prenatal, infant, and early development education • Building supportive relationships 	<p>Training:</p> <ul style="list-style-type: none"> • N/A <p>Program costs:</p> <ul style="list-style-type: none"> • Estimated at \$780,000 for 100 families over three years (varies according to local nursing salaries) • Mininum implementation for approved sites is 4 nurses and 1 supervisor serving 100 families
<p>Olweus Bullying Prevention</p> <p>Universal Indicated</p>	<p>Olweus Bullying Prevention is a multilevel, multicomponent school–based program designed to prevent or reduce bullying in elementary, middle, and junior high schools (students 6 to 15 years). The program attempts to restructure the existing school environment to reduce opportunities and rewards for bullying. School staff is largely responsible for introducing and implementing the program. Their efforts are directed toward improving peer relations and making the school a</p>	<p>Dan Olweus Research Professor and Program Director The HEMIL Center (Research Center for Health Promotion) Department of Psychology, University of Bergen Christiesgate 13, N–5015 Bergen, Norway Phone: 011–47–55–58–23–27 Email: olweus@online.no</p>	6–15	Male and Female	White	Rural, Suburban, and Urban schools	<ul style="list-style-type: none"> • Reduced frequency in student reports on bullying others and being bullied • Reduced student reports of general 	<ul style="list-style-type: none"> • Improving peer relations • Making the school a safe and pleasant place by restructuring the school environment to reduce opportunities and rewards for bullying behavior 	<p>Training:</p> <ul style="list-style-type: none"> • \$2,700 to \$3,750 for 1 1/2 day training of members of 1 or 2 schools Committees and followup consultation (approx. ten 1/2–hour phone calls) • Additional \$250 per half–day of travel time for trainer to travel to and

	<p>safe and positive place for students to learn and develop.</p> <p>While intervention against bullying is particularly important to reduce the suffering of the victims, it is also highly desirable to counteract these tendencies for the sake of the aggressive student, as bullies are much more likely than other students to expand their antisocial behaviors. Research shows that reducing aggressive, antisocial behavior may also reduce substance use and abuse.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Model Program: Office of Juvenile Justice Delinquency Prevention</p>	<p>Reidar Thyholdt Psychologist and Project Director The HEMIL Center (Research Center for Health Promotion) Department of Psychology University of Bergen Phone: 011-47-95-11-04-90 Email: reidar.thyholdt@psyhp.uib.no</p> <p>Marlene Snyder, Ph.D. Institute on Family and Neighborhood Life Clemson University 158 Poole Agricultural Center Clemson, SC 29634 Phone: (864) 710-4562 Fax: (864) 656-6281 Email: snvder@aboutmontana.net</p>					<p>antisocial behaviors: vandalism, fighting, theft, and truancy</p> <ul style="list-style-type: none"> Improved class social climate: order, discipline, positive relationships, and positive attitude toward schoolwork 		<p>from training site</p> <ul style="list-style-type: none"> Additional travel costs for trainer, including airfare (if appropriate), lodging, meals, local transportation, telephone calls Costs of training and consultation vary slightly by trainer, region of the country and the number of sites being trained <p>Materials:</p> <ul style="list-style-type: none"> \$200 per school for assessment tool \$65 per teacher for classroom materials
<p>Parenting Wisely</p> <p>Selective Indicated</p>	<p>The Parenting Wisely intervention is a self-administered, computer-based program that teaches parents and their 9- to 18-year-old children important skills for combating risk factors for substance use and abuse. The Parenting Wisely program uses a risk-focused approach to reduce family conflict and child behavior problems, including stealing, vandalism, defiance of authority, bullying, and poor hygiene. The highly interactive and nonjudgmental CD-ROM format accelerates learning, and parents use new skills immediately. The Parenting Wisely program:</p> <ul style="list-style-type: none"> Reduces children's aggressive and disruptive behaviors Improves parenting skills Enhances family communication Develops mutual support Increases parental supervision and appropriate discipline of their children <p>A highly versatile program, Parenting Wisely can be used alone, in a group, or with a practitioner at a variety of locations such as public agencies, schools, libraries, or at home. Semiliterate parents can use the Parenting Wisely program, as it provides the option to have the computer read all text aloud. Printed program portions are written at the fifth-grade level, and the entire program is available in Spanish.</p> <p>Recognition</p>	<p>Donald Gordon FamilyWorks, Inc. 340 W. State Street Room 135B, Unit 19 Athens, OH 45701-3751 Phone: (740) 593-9505; (541) 488-0729; Toll Free: 1(866) 234-WISE Fax: (541) 482-2829 Email: familyworks@familyworksinc.com Web site: www.parentingwisely.com/</p>	9-18 delinquents, at-risk adolescents, and parents	Male and Female	African American American Indian/Alaskan Native Asian American Hispanic/Latino Native Hawaiian and Other Pacific Islander (NHOPI) White	Urban, Suburban, and Rural settings	<ul style="list-style-type: none"> Increased knowledge of parenting principles and skills Reduced child problem behaviors 	<ul style="list-style-type: none"> Enhance parent communication skills Increase parental knowledge and use of appropriate and effective parenting techniques Promote healthy family interactions 	<p>Training:</p> <ul style="list-style-type: none"> No formal training available <p>Materials:</p> <ul style="list-style-type: none"> CD Kit costs \$659 and includes: 1 display poster, 5 workbooks, 1 service provider manual, 5 program completion certificates, 10 referral cards, 1 floppy disk with pre/post evaluation instrument, 20 brochures, and 2 parent registration forms. Three-part video series costs \$299

	<p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Exemplary II Program: Family Strengthening, Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice</p> <p>Pathways Project: Youth Justice Board, London, England</p>								
<p>Positive Action (PA)</p> <p>Universal Selective Indicated</p>	<p>Positive Action (PA) is an integrated, comprehensive, and coherent program that has been shown to improve academic achievement and behaviors of children and adolescents (5 to 18 years old) in multiple domains. It is intensive, with lessons at each grade level (from kindergarten to 12th) that are reinforced all day, schoolwide, at home, and in the community. It includes school, family, and community components that work together or can stand alone.</p> <p>For students, Positive Action improves:</p> <ul style="list-style-type: none"> • Individual self–concept • Academic achievement and learning skills • Decisionmaking, problem solving, and social/interpersonal skills • Physical and mental health • Behavior, character, and responsibility <p>PA improves school climate, attendance, achievement scores, disciplinary referrals/suspensions, parent and community involvement, services for special–need and high–risk students, efficiency and effectiveness. Positive Action positively affects instruction and classroom/school management skills of school personnel through improved self–concept, professionalism, and interpersonal/social skills and, in turn, has a positive impact on their personal lives.</p> <p>Finally, Positive Action helps families by improving parent–child relations and overall family attitudes toward and involvement in school and the community.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p>	<p>Carol Gerber Allred, Ph.D. Positive Action, Inc. 264 4th Ave. South Twin Falls, ID 83301 Phone: (208) 733–1328 Fax: (208) 733–1590 Email: info@positiveaction.net Web site: www.positiveaction.net</p>	5–18	Male and Female	Multiple Ethnic Groups	Rural, Suburban, and Urban schools, families, communities, businesses, churches, penal institutions	<ul style="list-style-type: none"> • Improved academic scores • Strong effects on drug use, tobacco and alcohol use, violence, suspensions, and delinquencies • Improved attendance • Improved self–concept • Parent involvement with children, schools, communities • Improved school climate • Improved character 	<ul style="list-style-type: none"> • Life skills • Social, self–management, and goal setting skills • Problem solving/goal setting skills • Anger management • Thinking skills • Character development • Mental and physical health • Social and emotional learning • Parent–child–school interactions • Bonding to schools, friends, family, community • Resilience • Communication skills • School reform • Conflict resolution 	<p>Training:</p> <ul style="list-style-type: none"> • Available to schools, families, and communities • \$1000 per day, plus \$700 per travel day and travel expenses <p>Materials:</p> <ul style="list-style-type: none"> • Available for all grade levels and includes a Teacher Kit (\$460 Kindergarten; \$360 Grade 1–8), School Climate Kit (\$450), Family Kit (\$75), Community Kit (\$550), Counselor Kit (\$125), 5th Grade Drug Education Supplement Teacher's Kit (\$230), and a Middle School Drug Education Supplement Teacher's Kit (\$360) • Training kit for elementary (\$500) secondary (\$600) schools, includes three pieces: orientation, ongoing sustainability, and publicity; sold separately are \$200 each • \$360 Ninth–Twelfth Kit I: Life's Big Questions • \$360 Ninth–Twelfth Kit II: Life's Big Questions: "Lives on the Line" Play • \$360 Ninth–Twelfth Kit III: Life's Big Questions: Projects for Teens • \$360 Ninth–Twelfth Kit IV: Life Training for Teens • \$140 Elementary Implementation Plan

	<p>Promising Program: Department of Education</p> <p>Model Program: Department of Education, Title I Comprehensive School Reform</p> <p>Promising Practices: Education Commission of the States for Comprehensive School Reform</p> <p>Governor's Award: Idaho Exemplary Substance Abuse Programs</p>								(includes evaluation tools) • \$140 Elementary Rejuvenation Plan
Project ACHIEVE Universal Selective	<p>Project ACHIEVE is an innovative school reform and school effectiveness program developed for use in preschool, elementary, and middle schools (students 3 to 14 years old). It is designed to help schools, communities, and families develop, strengthen, and solidify their youth's resilience, protective factors, and self-management skills. Project ACHIEVE works to improve school and staff effectiveness, and places particular emphasis on increasing student performance in the areas of:</p> <ul style="list-style-type: none"> • Social skills and social-emotional development • Conflict resolution and self-management • Achievement and academic progress • Positive school climate and safe school practices <p>Project ACHIEVE implements schoolwide positive behavioral and academic prevention programs that focus on the needs of all students. It also develops and implements strategic intervention programs for at-risk and underachieving students, and it coordinates comprehensive and multifaceted "wrap-around" programs for students with intensive needs.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Exemplary Program: White House Conference on School Safety</p> <p>Effective School Reform Program: Center for Effective Collaboration and Practice, American Institutes for Research</p>	<p>Dr. Knoff, Howard M. No Affiliation 8505 Portage Avenue Tampa, FL 33647 Phone: (813) 978-1718 Fax: (813) 972-1392 Email: knoffprojectachieve@earthlink.net Web site: www.coedu.usf.edu/projectachieve</p> <p>Stop and Think Program Materials: Sopris West, Inc. 4093 Specialty Place Longmont, CO 80504 Phone: (800) 547-6747 Web site: www.sopriswest.com</p>	Pre-K through Middle School; Adapted at the High School level	Male and Female	African American American Indian/Alaskan Native American Asian American Hispanic/Latino Native Hawaiian and Other Pacific Islander (NHOPi) White	Rural, Suburban, and Urban pre-schools, elementary schools, middle schools, and high schools; alternative and juvenile justice facilities; and special education centers	<ul style="list-style-type: none"> • Decreased referrals to and placements in special education • Decline in disciplinary referrals to office of principal and school suspension • Improved academic performance 	<ul style="list-style-type: none"> • Social skills • Problem solving methods • Anger-reduction techniques • Building-wide, positive behavior support and management approaches 	<p>Training:</p> <ul style="list-style-type: none"> • Minimum of 2 days of building-wide training and 1 day technical consultation • \$1,500 per day, plus expenses; training done by Howard Knoff or Sopris West • Training and consultation/technical assistance costs may involve up to 10 to 15 days for the first 3 years. These costs will taper over time and may be offset by combining these costs with other resources already available to the school system. <p>Materials:</p> <ul style="list-style-type: none"> • \$125 classroom package of Stop Think social skills teachers manual, reproducible forms booklet, skill cards for all students, posters, large and small Stop Think stop signs • Additional Stop Think signs for building (approximately \$250) • Additional Stop Think posters for building (approximately \$100) • \$69 Teacher manuals and reproducible forms • \$15 – \$22.50 Classroom materials sold separately in sets of 5 • \$45.95 Parent Training Video • \$1.90 – \$25 Sets of

									<p>support materials sold separately in packages of 5 and up (charms, stickers, magnets, memo pads, pencils, pins, signs, self-inking stamps, and t-shirts)</p> <ul style="list-style-type: none"> • To order materials call <i>Sopris West</i> at 1(800) 547-6747 • Materials also available in Spanish.
<p>Project ALERT</p> <p>Universal Selective</p>	<p>Project ALERT is a drug prevention curriculum for middle-school students (11 to 14 years old), which dramatically reduces both the onset and regular use of substances. The 2-year, 14-lesson program focuses on the substances that adolescents are most likely to use: alcohol, tobacco, marijuana, and inhalants. Project Alert use participatory activities and videos to help:</p> <ul style="list-style-type: none"> • Motivate adolescents against drug use • Teach adolescents the skills and strategies needed to resist prodrug pressures • Establish nondrug-using norms <p>Guided classroom discussions and small group activities stimulate peer interaction and challenge student beliefs and perceptions, while intensive role-playing activities help students learn and master resistance skills. Homework assignments that also involve parents extend the learning process by facilitating parent-child discussions of drugs and how to resist using them. These lessons are reinforced through videos that model appropriate behavior.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Exemplary Program: U.S. Department of Education</p> <p>Exemplary Program: White House Office of National Drug Control Policy</p> <p>Exemplary Program: National Prevention Network, the National Association of State and Alcohol and Drug Abuse Directors, the Community</p>	<p>Phyllis L. Ellickson, Ph.D. RAND</p> <p>G. Bridget Ryan President Project ALERT 725 S. Figueroa Street, Suite 970 Los Angeles, CA 90017-5416 Phone: (800) 253-7810 Fax: (213) 623-0585 Email: gbrvan@projectalert.best.org Web site: www.projectalert.com</p> <p>Phyllis L. Ellickson, Ph.D. RAND 1700 Main Street Santa Monica, CA 90407 Phone: (310) 393-0411 Fax: (301) 451-7062 Email: phyllis_ellickson@rand.org Web site: www.rand.org</p>	11-14	Male and Female	African American American Indian/Alaskan Native Asian American Hispanic/Latino Native Hawaiian and Other Pacific Islander (NHOP) White	Rural, Suburban, and Urban middle schools	<ul style="list-style-type: none"> • Reduced marijuana use initiation • Decreased current and heavy smoking • Reduced pro-drug attitudes and beliefs • Helped smokers quit 	<ul style="list-style-type: none"> • Build schoolwide norms against drug use • Understand social/health consequences of drug use • Identify pro-drug pressures • Develop resistance skills • Involve parents in prevention • Recognize benefits of being drug-free 	<p>Training:</p> <ul style="list-style-type: none"> • \$150 (includes training workshop, all program materials, and on-going TA) • Workshop and online training are available. Also, onsite training costs \$4200 for 25 participants and an additional \$150 for each additional person. <p>Materials:</p> <ul style="list-style-type: none"> • Teacher manual (includes core and booster lessons), 8 student videos, 12 classroom posters, overview video for colleagues community, optional teen leader manual • Trained Project ALERT teachers continue to receive: <ul style="list-style-type: none"> ◆ Free video print curriculum updates ◆ Free subscription to <i>ALERT Educator</i> teacher support newsletter ◆ Toll-free phone support TA ◆ Access to an on-line faculty advisor <p>• NOTE: An</p>

	Anti-Drug Coalitions of America Endorsed by the National Middle School Association								overview/promotional video is available on request • Parental/take-home materials also available in Spanish.
Project Northland Universal	<p>Project Northland is a multilevel, multiyear program proven to delay the age at which young people begin drinking, reduce alcohol use among those who have already tried drinking, and limit the number of alcohol-related problems of young drinkers. Designed for sixth, seventh, and eighth grade students (10 to 14 years old), Project Northland addresses both individual behavioral change and environmental change. Project Northland also strives to change how parents communicate with their children, how peers influence each other, and how communities respond to young adolescent alcohol use. Components include:</p> <ul style="list-style-type: none"> • Parent involvement and education programs • Behavioral curricula • Peer participation • Community activities <p>Each intervention year has an overall theme and is tailored to the developmental level of the young adolescent. Alcohol is the focus of the Project Northland program because it is American teenagers' drug of choice and inflicts the greatest harm among youth.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Exemplary Program: U.S. Department of Education</p> <p>Rated "A": Drug Strategies, <i>Making the Grade</i></p>	<p>Cheryl Perry, Ph.D. Program Contact: Ann Standing Hazelden Publishing and Educational Services 15251 Pleasant Valley Road Box 176 Center City, MN 55012-0176 Phone: (651) 213-4030; Toll free: (800) 328-9000, ext. 4030 Fax: (651) 213-4793 Email: astanding@hazelden.org Web site: www.hazelden.org</p>	10-14	Male and Female	African American American Indian/Alaskan Native American Asian American Hispanic/Latino Native Hawaiian and Other Pacific Islander (NHOPI) White	Rural, Suburban, and Urban middle schools	<ul style="list-style-type: none"> • Reductions in daily smoking, marijuana, and alcohol use 	<ul style="list-style-type: none"> • Peer leadership • Parent involvement 	<p>Training:</p> <ul style="list-style-type: none"> • \$1750 per day plus expenses • Trainings posted on Web site • Registration Training Events (offered nationwide, see Web site for schedule): <ul style="list-style-type: none"> ♦ \$755 for training plus one complete curriculum (training is 3 days) for Grades 6-8 ♦ \$430 for training plus one complete <i>SuperCharged!</i> component <p>Materials:</p> <ul style="list-style-type: none"> • \$245 for each grade (includes all materials) • \$755 for complete 4-piece set (3 grades plus <i>Supercharged!</i>)
Project SUCCESS Selective Indicated	<p>Project SUCCESS (Schools Using Coordinated Community Efforts to Strengthen Students) prevents and reduces substance use among high-risk, multiproblem high school adolescents. Developed and tested with alternative school youth 14 to 18 years old, the program places highly</p>	<p>Ellen Morehouse, M.S.W., CASAC, CPP Student Assistance Services Corporation 660 White Plains Road Tarrytown, NY 10591 Phone: (914) 332-1300</p>	14-18	Male and Female	African American Asian American Hispanic/Latino Native Hawaiian	Rural, Suburban, and Urban high schools	<ul style="list-style-type: none"> • Reduction in alcohol, tobacco, and illegal drug use and related problems 	<ul style="list-style-type: none"> • Individual and group counseling • Youth coping skills • Resistance skills 	<p>Training:</p> <ul style="list-style-type: none"> • \$375, plus expenses per person, includes materials and manual <p>Materials:</p> <ul style="list-style-type: none"> • \$150 Manual

	<p>trained professionals in schools to provide a full range of substance use prevention and early intervention services. Counselors use a variety of intervention strategies, including:</p> <ul style="list-style-type: none"> • Information dissemination • Normative and preventive education • Counseling and skills training • Problem identification and referral • Community-based processes • Environmental approaches <p>In addition, Project SUCCESS links the school to the community's continuum of care when necessary, referring both students and families to human services organizations, including substance abuse treatment agencies.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p>	<p>Fax: (914) 366-8826 Email: sascorp@aol.com Web site: www.sascorp.org</p>			and Other Pacific Islander (NHOPI) White				
<p><u>Project Toward No Drug Abuse (TND)</u></p> <p>Selective Indicated</p>	<p>Project Toward No Drug Abuse (TND) is a highly interactive program designed to help high school youth (14 to 19 years old) resist substance use. A school-based program, TND consists of twelve 40- to 50-minute lessons that include motivational activities, social skills training, and decisionmaking components that are delivered through group discussions, games, role-playing exercise, videos, and student worksheets. Project TND teaches participants increased coping and self-control skills that allow them to:</p> <ul style="list-style-type: none"> • Grasp the cognitive misperceptions that may lead to substance use and express a desire not to abuse substances • Understand the sequence of substance abuse and the consequences of using substances • Correct myths concerning substance use • Demonstrate effective communication, coping, and self-control skills • State a commitment to discuss substance abuse with others <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p>	<p>Steve Sussman, Ph.D. FAAHB Institute for Health Promotion and Disease Prevention Dept. of Preventive Medicine, USC 1000 South Fremont Avenue, Unit 8, Suite 4124 Alhambra, CA 91803 Phone: (626) 457-6635 Fax: (626) 457-4012 Email: ssussma@hsc.usc.edu Web site: www.cceanet.org/Research/Sussman/tnd.htm</p> <p>Stephen Hawk Institute for Health Promotion and Disease Prevention Dept. of Preventive Medicine, USC 1000 South Fremont Avenue, Unit 8, Suite 4124 Alhambra, CA 91803 Phone: (626) 457-6635 Fax: (626) 457-4012</p>	14-19	Male and Female	Multiple Ethnic Groups	Rural, Suburban, and Urban high schools	<ul style="list-style-type: none"> • Reduced levels of alcohol use (among baseline users) • Reduced levels of cigarette smoking • Reduced levels of hard drug use • Reduced levels of marijuana use • Reduced levels of weapon carrying (among males) 	<ul style="list-style-type: none"> • Social and health consequences of drug use • Active listening • Effective communication • Stress management • Self-control and self-confidence • Cognitive misperception correction • Motivation enhancement • Decisionmaking 	<p>Training:</p> <ul style="list-style-type: none"> • \$500 per day, plus expenses <p>Materials:</p> <ul style="list-style-type: none"> • \$70 Teacher manual • \$50 Student workbook (set of 5) • \$40 <i>Drugs and Life Dreams</i> video

	Exemplary Program: Health Canada Model Program: Sociometrics, Inc.								
Project Towards No Tobacco Use (TNT) Universal	<p>Project Towards No Tobacco Use (TNT) is a comprehensive, classroom-based curriculum designed to prevent or reduce tobacco use in youth 10 to 15 years old in grades five through ten. Upon completion of this program, students will be able to describe the course of tobacco-addiction, the consequences of using tobacco, and the prevalence of tobacco use among peers. Delivered in 10 core and 2 booster lessons, TNT is proven effective at helping youth to:</p> <ul style="list-style-type: none"> • Resist tobacco use and advocate no tobacco use • Demonstrate effective communication, refusal, and cognitive coping skills • Identify how the media and advertisers influence youth to use tobacco products • Identify methods for building their own self-esteem • Describe strategies for advocating no tobacco use <p>Project TNT is designed to counteract several different causes of tobacco use simultaneously because the behavior is determined by multiple causes. This comprehensive approach works well for a wide variety of youth who may have different risk factors influencing their tobacco use.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Programs That Work: National Institute on Drug Abuse, National Institutes of Health, U.S. Department of Health and Human Services</p> <p>Exemplary Program: U.S. Department of Education</p> <p>Programs That Work: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services</p>	<p>Steve Sussman, Ph.D. FAAHB Institute for Health Promotion and Disease Prevention Dept. of Preventive Medicine, USC 1000 South Fremont Avenue, Unit 8, Suite 4124 Alhambra, CA 91803 Phone: (626) 457-6635 Fax: (626) 457-4012 Email: ssussma@hsc.usc.edu</p> <p>Stephen Stephen Hauk Institute for Health Promotion and Disease Prevention Dept. of Preventive Medicine, USC 1000 South Fremont Avenue, Unit 8, Suite 4124 Alhambra, CA 91803 Phone: (626) 457-6635 Fax: (626) 457-4012</p> <p>To order teacher's manual and student workbooks: ETR Associates P.O. Box 1830 Santa Cruz, CA 95061-1830 Phone: (800) 321-4407 Fax: (800) 435-8433 Web site: www.etr.org/</p>	10-15	Male and Female	African American Asian American Hispanic/Latino Native Hawaiian and Other Pacific Islander (NHOPI) White	Rural, Suburban, and Urban elementary and middle schools	<ul style="list-style-type: none"> • Reduction of initiation of smoking • Reduction of weekly and frequent smoking • Reduction of initiation of smokeless tobacco use • Reduction of weekly and frequency of smokeless tobacco use 	<ul style="list-style-type: none"> • Communication, assertiveness and tobacco specific cognitive coping skills • Course of addiction and disease • Media literacy and social activism • Public commitment 	<p>Training:</p> <ul style="list-style-type: none"> • \$500, plus expenses <p>Materials:</p> <ul style="list-style-type: none"> • \$40 TNT Cessation • \$40 Tobacco video • \$80 Peer Pressure video • \$2.50 Post test • \$45 Curriculum • \$18.95 set of 5 student workbooks
Prolonged Exposure	Prolonged Exposure (PE) therapy is a	<p>Edna B. Foa, Ph.D. Director</p>	18-70	Male and Female	Multiple Ethnic	Suburban and Urban	<ul style="list-style-type: none"> • Decrease in the 	<ul style="list-style-type: none"> • Behavior Modification: to 	<p>Training:</p> <ul style="list-style-type: none"> • N/A

<p>Therapy for Posttraumatic Stress Disorders</p> <p>Indicated</p>	<p>cognitive-behavioral treatment program for individuals suffering from posttraumatic stress disorder (PTSD). The program consists of a course of individual therapy designed to help clients process traumatic events and thus reduce trauma-induced psychological disturbances. Twenty years of research has shown that PE significantly reduces the symptoms of PTSD, depression, anger, and general anxiety. The standard treatment program consists of 9 to 12, 90-minute sessions. PE includes three components:</p> <ul style="list-style-type: none"> • Psychoeducation about common reactions to trauma and the cause of chronic post-trauma difficulties • Imaginal exposure: repeated recounting of the traumatic memory (emotional reliving) • In-vivo exposure: gradually approaching trauma reminders (e.g., situations, objects) that, despite being safe, are feared and avoided <p>PE therapy reduces PTSD symptoms including intrusive thoughts, intense emotional distress, nightmares and flashbacks, avoidance, emotional numbing and loss of interest, sleep disturbance, concentration impairment, irritability and anger, hypervigilance and excessive startle response.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Exemplary Service and Support to Victims and Witnesses of Crime Award: Philadelphia Coalition for Victim Advocacy</p>	<p>Center for the Treatment and Study of Anxiety Department of Psychiatry University of Pennsylvania 3535 Market Street, Suite 600 North Philadelphia, PA 19104 Phone: (215) 746-3327 Fax: (215) 746-3311 Email: foa@mail.med.upenn.edu</p> <p>For program, training, and research information: Center for the Treatment and Study of Anxiety Department of Psychiatry University of Pennsylvania 3535 Market Street, 600 N Philadelphia, PA 19104 Email: cta@mail.med.upenn.edu Web site: http://www.med.upenn.edu/cta/</p> <p>Elizabeth A. Hembree, Ph.D. Assistant Professor and Director of Training Center for the Treatment and Study of Anxiety Phone: (215) 746-3327 Fax: (215) 746-3311 Email: hembree@mail.med.upenn.edu</p> <p>David S. Riggs, Ph.D. Assistant Professor Center for the Treatment and Study of Anxiety Phone: (215) 746-3327 Fax: (215) 746-3311 Email: driggs@mail.med.upenn.edu</p>			Groups	settings in clinics, including community mental health outpatient clinics, veterans' centers, rape counseling centers, private practice offices, and inpatient units	<p>diagnosis of PTSD in clients who completed the 9 or 12 session course</p> <ul style="list-style-type: none"> • Improved daily functioning • Reduction in depression, general anxiety, and anger 	<p>reduce the symptoms of depression, anger, and general anxiety</p> <ul style="list-style-type: none"> • Information Sharing: to understand reactions to trauma and the cause of chronic posttrauma difficulties • Imaginal Exposure and In Vivo Therapies: to provide a therapeutic intervention for indicated audiences 	<p>Materials:</p> <ul style="list-style-type: none"> • N/A
<p>Promoting Alternative Thinking Strategies (PATHS)</p> <p>Universal Selective</p>	<p>PATHS (Promoting Alternative Thinking Strategies) is a comprehensive program for promoting emotional and social competencies and reducing aggression and acting-out behaviors in elementary-school-aged children, while simultaneously enhancing the educational process in the classroom. This innovative curriculum for kindergarten through sixth grade (ages 5 to 12) is used by educators and counselors as a multiyear, prevention model. The PATHS curriculum provides teachers with systematic and developmentally based lessons, materials, and instructions for teaching their students:</p>	<p>Carol A. Kusché, Ph.D. Prevention Research Center Henderson Building S-109 Pennsylvania State University University Park, PA 16802 Phone: (814) 863-0112 Fax: (814) 865-2530 Email: mxe47@psu.edu Web site: www.prevention.psu.edu/PATHS/</p> <p>Mark T. Greenberg, Ph.D. Channing Bete Company One Community Place South Deerfield, MA 01373</p>	5-10	Male and Female	African American American Indian/Alaskan Native Asian American Hispanic/Latino Multiple Ethnic Groups Native Hawaiian and Other Pacific	Rural, Suburban, and Urban schools and communities	<ul style="list-style-type: none"> • Improved self-control, emotional literacy, ability to tolerate frustration • Decreased anxiety/depression, conduct problems, and symptoms of sadness 	<ul style="list-style-type: none"> • Prevent or reduce behavioral and emotional problems • Assist students in identifying/labeling feelings and behaviors • Provide teachers with systematic lessons and materials 	<p>Training:</p> <ul style="list-style-type: none"> • \$3,000 plus expenses (does not include materials) <p>Materials:</p> <ul style="list-style-type: none"> • \$640 for a complete 7-volume set • \$300-\$350 for each individual grade level • Implementation Costs: <ul style="list-style-type: none"> ◆ Using existing staff approximately \$15 per child

	<ul style="list-style-type: none"> • Emotional literacy • Self-control • Social competence • Positive peer relations • Interpersonal problem-solving skills <p>The PATHS curriculum has been shown to improve protective factors and reduce behavioral risk factors. Evaluations have demonstrated significant improvements for program youth, including those in general education and special needs settings. Although primarily focused on school and classroom settings, information and activities are also included for use with parents.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Model Program: Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice</p> <p>Promising Program: U.S. Surgeon General's Report on Youth Violence</p> <p>Promising Program: Safe and Drug-Free Schools Program, U.S. Department of Education</p> <p>Best Practices in Youth Violence Prevention Program: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services</p> <p>SElect Program: Collaborative for Academic, Social and Emotional Learning</p>	<p>Phone: (877) 896-8532 Fax: (800) 499-6464 Email: PrevSci@channing-bete.com Web site: www.preventionscience.com</p>			Islander (NHOPI) White		and depression		<p>per year over 3 years</p> <ul style="list-style-type: none"> ◆ Using full-time salaried on-site PATHS coordinator approximately \$40-\$50 per child per year
Protecting You/Protecting Me/Universal	<p>Protecting You/Protecting Me®(PY/PM) is a 5-year, classroom-based alcohol-use prevention curriculum for elementary students in grades one through five (6 to 11 years old). Designed to reduce alcohol-related injury and death in our Nation's youth, PY/PM:</p> <ul style="list-style-type: none"> • Is proven to change children's knowledge about their brains and personal development • Increases children's intentions not to ride with an impaired driver • Improves children's vehicle safety skills: their ability to protect themselves when they have no option but to ride with an adult who is not 	<p>Kappie Bliss, M.Ed., LPC Director Elementary Programs Mothers Against Drunk Driving 611 South Congress Avenue Suite 210 Austin, TX 78704 Phone: (512) 693-9422 Fax: (512) 693-9435 Email: kappie@kbliss.com Web site: www.pvpm.org/</p>	6-11	Male and Female	African American American Indian/Alaskan Native Asian American Hispanic/Latino Native Hawaiian and Other Pacific Islander (NHOPI) White	Rural, Suburban, and Urban elementary schools	<ul style="list-style-type: none"> • Students less likely to ride with impaired driver • Students gained critical life-saving skills to protect themselves when they have no option but to ride with an impaired 	<ul style="list-style-type: none"> • Importance of protecting the brains of persons under age 21 years of age from the biological effects of alcohol • Ways to help children avoid the risks associated with riding with drivers who are alcohol impaired 	<p>Training:</p> <ul style="list-style-type: none"> • 1-day teacher training: \$155 to \$365 (Grades 1-5) • 2-day teacher training: \$195 to \$405 (Grades 1-5) • A minimum of 20 trainees are required for each training <p>Materials:</p> <ul style="list-style-type: none"> • Cost of materials included in training costs

	<p>alcohol-free</p> <p>Because the program is delivered in elementary school, it reaches children before they have fully formed their attitudes toward alcohol. The curriculum:</p> <ul style="list-style-type: none"> • Incorporates the latest research on human brain development • Focuses on the immediate risks of using alcohol before age 21 • Includes parental involvement activities <p>The program can be taught by trained high school students, as well as by teachers, with high school student teachers deriving short-term outcomes including reduced alcohol use and increased perceptions of the risks of underage alcohol use.</p> <p>All program materials are available in English and Spanish.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Texas Commission on Alcohol and Drug Abuse State Wide Replication Program</p> <p>Endorsed by the National Elementary Principals Association</p> <p>Endorsed by the American Academy of Pediatrics</p>						<p>driver</p> <ul style="list-style-type: none"> • Students become more strongly opposed to drinking and driving and to underage drinking • Students increased their media literacy and gained knowledge about their brains and becoming grown-up • High school students teaching PY/PM also demonstrated significant increases in their attitudes toward the risks of underage alcohol and other drug use and declines in their own personal use of alcohol 		
<p>Reconnecting Youth (RY)</p> <p>Indicated</p>	<p>Reconnecting Youth (RY) is a school-based prevention program for youth in grades nine through twelve (14 to 18 years old) who are at risk for school dropout. These youth may also exhibit multiple behavior problems, such as substance abuse, aggression, depression, or suicide risk behaviors. Reconnecting Youth uses a partnership model involving peers, school personnel, and parents to deliver interventions that address the three central program goals:</p> <ul style="list-style-type: none"> • Decreased drug involvement • Increased school performance • Decreased emotional distress 	<p>Leona L. Eggert, Ph.D., RN, FAAN University of Washington School of Nursing Box 357263 Seattle, WA 98195-7263 Phone: (425) 861-1177 Fax: (425) 861-8071 Email: eggert@u.washington.edu Web site: www.son.washington.edu/departments/bch/ry</p> <p>Program and Training Contact: Liela Nicholas Co-Developer and Principle RY Trainer</p>	14-18	Male and Female	Multiple Ethnic Groups	Urban and Suburban high schools	<ul style="list-style-type: none"> • Increased school performance • Decreased deviant peer bonding • Decreased depression and aggression 	<ul style="list-style-type: none"> • Mentoring • Social support • School bonding • High school dropout prevention 	<p>Training:</p> <ul style="list-style-type: none"> • \$750 per day, plus travel and expenses for 5 to 7 participants <p>Materials:</p> <ul style="list-style-type: none"> • \$179, plus shipping for curriculum

	<p>Students work toward these goals by participating in a semester-long high school class that involves skills training in the context of a positive peer culture. RY students learn, practice, and apply self-esteem enhancement strategies, decision-making skills, personal control strategies, and interpersonal communication techniques.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Programs That Work: National Institute on Drug Abuse</p> <p>Grade "A" "A+": Drug Strategies</p>	<p>Phone: (425) 861-1177 Fax: (425) 861-8071</p>							
<p>Residential Student Assistance Program (RSAP)</p> <p>Selective Indicated</p>	<p>The Residential Student Assistance Program (RSAP) is a substance abuse prevention program developed for high-risk adolescents (14 to 17 years old) living in residential facilities. The program is based on the Westchester Student Assistance Model and works by placing highly trained professionals in residential facilities to provide residents with a full range of substance abuse prevention and early intervention services. The program uses proven prevention strategies that include:</p> <ul style="list-style-type: none"> • Information dissemination • Normative and preventive education • Problem identification and referral • Community-based interventions • Environmental approaches <p>RSAP counselors work with adolescents individually and in small groups. Intervention services are fully integrated into the adolescent's overall experience at the residential facility and have an impact on both their school and residential environments.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p>	<p>Ellen R. Morehouse, ASW, CASAC Student Assistance Services 660 White Plains Road Tarrytown, NY 10591 Phone: (914) 332-1300 Fax: (914) 366-8826 Email: sascorp@aol.com Web site: www.sascorp.org/residesap.htm</p>	14-17	Male and Female	African American Hispanic/Latino	Urban residential facilities	<ul style="list-style-type: none"> • Reduced marijuana, alcohol, and tobacco use 	<ul style="list-style-type: none"> • Individual and group counseling • Youth coping skills 	<p>Training:</p> <ul style="list-style-type: none"> • \$375, plus expenses per person, includes materials <p>Materials:</p> <ul style="list-style-type: none"> • Included in training cost
<p>Responding in Peaceful and Positive Ways (RIPP)</p>	<p>Responding in Peaceful and Positive Ways (RIPP) is a school-based violence prevention program designed to provide students in middle and junior</p>	<p>Aleta Lynn Meyer, Ph.D. Department of Psychology Virginia Commonwealth University VCU Box 2018</p>	10-14	Male and Female	African American Hispanic/Latino White	Rural, Suburban, and Urban middle	<ul style="list-style-type: none"> • Decreased school disciplinary code 	<ul style="list-style-type: none"> • Promotion of schoolwide norms for nonviolence and achievement 	<p>Training:</p> <ul style="list-style-type: none"> • \$650 per person <p>Materials:</p>

<p>Universal</p>	<p>high schools with conflict resolution strategies and skills. It combines a classroom curriculum of social/cognitive problem solving with real-life skill-building opportunities such as peer mediation. Students learn to apply critical thinking skills and personal management strategies to personal health and well-being issues. Delivered over 3 years, RiPP teaches key concepts that include:</p> <ul style="list-style-type: none"> • The importance of significant friends or adult mentors • The relationship between self-image and gang-related behaviors • The effects of environmental influences on personal health <p>Using a variety of lessons and activities, students learn about the physical and mental development that occurs during adolescence; analyze the consequences of personal choices on health and well-being; learn that they have nonviolent options when conflicts arise; and evaluate the benefits of being a positive family and community role model.</p> <p>In a within-school evaluation of RiPP, compared to control students, RiPP-6 students at post-test were significantly less likely to have disciplinary code violations for carrying weapons, were less likely to have in-school suspensions, had lower reported rates of fight-related injuries, and were more likely to participate in their school's peer-mediation program. RiPP-7 participants showed a significant increase in their knowledge of curriculum material and a trend for greater decreases in anxiety. At 6-month follow-up, RiPP-7 students reported lower rates of peer pressure to use drugs, and showed a significant increase in prosocial responses to hypothetical problem situations. In another study, compared to students at control schools, students at intervention schools reported more favorable attitudes toward nonviolence, less favorable attitudes toward violence, and greater knowledge of the material covered in the intervention. Significant differences on the frequency of aggression were found at post-test. An evaluation of RiPP-8 is currently underway.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Effective Program: Safe and Drug Free Schools, U.S. Department of Education</p>	<p>808 West Franklin Street Richmond, VA 23284 Phone: (804) 828-0015 Fax: (804) 828-2237 Email: ameyer@saturn.vcu.edu</p>				<p>schools</p>	<p>violations</p> <ul style="list-style-type: none"> • Decreased student reported frequency of drug use and violent behaviors • Increased prosocial attitudes and peer support for prosocial behavior • Decreased peer pressure to use drugs 	<ul style="list-style-type: none"> • Social cognitive problem-solving model that provides several social skills options for nonviolence • Implementation of program by adult role model • Opportunities for real-life application of skills 	<ul style="list-style-type: none"> • Material costs are included in training costs. Training is required to obtain curriculum.
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<p>Schools and Families Educating Children (SAFE Children)</p> <p>Universal Selective</p>	<p>SAFE Children is a community- and school-based program that helps families manage educational and child development in communities where children are at high risk for substance abuse and other problem behaviors. It is based on a developmental-ecological model that looks at how neighborhood and school characteristics affect children and families, children's school achievement, their social adjustment, and their maturation. The program aims to help children 5 to 6 years old make the transition into elementary school, have a successful first year, and set a strong base for the future. Families with children entering first grade and living in inner-city, high-risk neighborhoods are enrolled in a 20-week family program that aims to:</p> <ul style="list-style-type: none"> • Build support networks among parents • Develop parenting skills and knowledge of child development • Give parents a better understanding of schools and how they work • Ensure that children have the skills to master basic reading skills <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p>	<p>Patrick Tolan, Ph.D. Director Institute for Juvenile Research Department of Psychiatry The University of Illinois at Chicago 840 South Wood Street Chicago, IL 60612-7347 Phone: (312) 413-1893 Email: Tolan@uic.edu</p>	<p>4-6 and parents</p>	<p>Male and Female</p>	<p>African American/Hispanic/Latino</p>	<p>Urban schools</p>	<ul style="list-style-type: none"> • Children's social competence increased as the result of improved family emotional cohesion • Greater improvement in academic achievement than control group • Parents maintained enthusiasm for and involvement in children's school life • Parents used more effective parenting practices, and reported greater use of home rules and family organization strategies • Reading scores approximated the national average and were 4 months ahead of control group 	<ul style="list-style-type: none"> • Parent Training • School/community collaboration • Skill development • Tutoring 	<p>Training:</p> <ul style="list-style-type: none"> • Cost and budget information under development <p>Materials:</p> <ul style="list-style-type: none"> • Tracking software package for MAC computers \$549
<p>Second Step</p> <p>Universal</p>	<p>Second Step is a classroom-based social skills program for preschool through junior high students (4 to 14 years old). It is designed to reduce impulsive, high-risk, and aggressive behaviors; and increase children's social-emotional competence and other protective factors.</p> <p>Group discussion, modeling, coaching, and practice are used to increase students' social competence,</p>	<p>Claudia Glaze Committee for Children Client Support Services Dept. 568 First Avenue, Suite 600 Seattle, WA 98104 Phone: (800) 634-4449 Fax: (206) 438-6765 Email: info@cfchildren.org Web site: www.cfchildren.org/program_ss.shtml</p>	<p>4-14</p>	<p>Male and Female</p>	<p>African American/Hispanic/Latino and White</p>	<p>Rural, Suburban, and Urban pre-K through middle schools; community centers</p>	<ul style="list-style-type: none"> • Reduced physical and verbal aggression • Increased positive social interactions • Greater understanding 	<ul style="list-style-type: none"> • Teach empathy, impulse control, and anger management skills • Provide opportunities for modeling, practice, and reinforcement of these skills 	<p>Training:</p> <ul style="list-style-type: none"> • Regional Staff Training (1 day): \$169 per participant, for Preschool-Grade 9. (Second Step curriculum not included.) • Regional Training for Trainers (3days): \$499 per participant for

	<p>risk assessment, decisionmaking ability, self-regulation, and positive goal setting. The program's lesson content varies by grade level and is organized into three skill-building units covering:</p> <ul style="list-style-type: none"> • Empathy: teaches young people to identify and understand their own emotions and those of others • Impulse control and problem solving: helps young people choose positive goals; reduce impulsiveness; and evaluate consequences of their behavior in terms of safety, fairness, and impact on others • Anger management: enables young people to manage emotional reactions and engage in decisionmaking when they are highly aroused <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Exemplary Program: U.S. Department of Education</p> <p>"A" Program: Drug Strategies</p>						<p>of emotional skills</p> <ul style="list-style-type: none"> • Less likely to endorse relational aggression 		<p>Preschool–Grade 9 (Trainer's Manual and staff training videos are included. The Second Step curriculum materials are not included.)</p> <ul style="list-style-type: none"> • Second Step Family Guide Facilitator Training: \$169 per participant for Preschool–Grade 5. (Family Guide manual not included.) <p>Materials:</p> <ul style="list-style-type: none"> • Pre-school Kindergarten Kit (ages 4– 6) <ul style="list-style-type: none"> ♦ \$259 Puppets: <ul style="list-style-type: none"> ›Puppy \$38 ›Snail \$24 ›Buy both receive 20% discount \$49 • Segundo Paso Spanish Language Supplement: \$50 • Grades 1–3 Kit: \$269 • Grades 4–5 Kit: \$249 • Additional Anger Management Posters are \$4 each • Segundo Paso Spanish Language Supplements (Grades 1– 3): \$50 • Segundo Paso Spanish Language Supplements (Grades 4 – 5): \$50 • Middle School/Junior High: <ul style="list-style-type: none"> ›Level 1 Foundation: \$295 ›Level 2 Skill Building: \$125 ›Level 3 Skill Building: \$125 • Materials also available in Spanish.
<p>Start Taking Alcohol Risks Seriously (STARS) for Families</p> <p>Universal</p>	<p>Start Taking Alcohol Risks Seriously (STARS) for Families is a health promotion program for preventing alcohol use among at-risk middle and junior high school youth (11 to 14 years old). The goal of STARS for Families is to have all youth postpone alcohol use until adulthood. STARS for</p>	<p>Chudley E. WerchCHES, Ph.D., FAAHB Center for Drug Prevention and Health Promotion University of North Florida, College of Health 4567 St. Johns Bluff Road, South</p>	<p>11–14 and parents</p>	<p>Male and Female</p>	<p>African American White</p>	<p>Rural, Suburban, and Urban middle schools</p>	<ul style="list-style-type: none"> • Avoidance of and reductions in alcohol use among youth 	<ul style="list-style-type: none"> • Health care consultations • Key Facts Postcards • Parent/Guardian take-home lessons 	<p>Training:</p> <ul style="list-style-type: none"> • To be decided <p>Materials:</p> <ul style="list-style-type: none"> • To be decided

	<p>Families matches media-related, interpersonal, and environmental prevention strategies to each child's specific stages of alcohol initiation, stages of readiness for change, and specific risk and protective factors. This innovative program has been shown to result in avoidance of, or reductions in, alcohol use among participating youth.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Promising Prevention Program: The Urban Institute</p>	<p>Building 39/3042A Jacksonville, FL 32224-2645 Phone: (904) 620-2847 Fax: (304) 620-1035 Email: cwerch@unf.edu</p> <p>Paula Jones NIMCO Incorporated P.O. Box 9 Calhoun, KY 42327-0009 Phone: 1(800) 962-6662 x.114 Email: paula@nimcoinc.com Web site: www.nimcoinc.com</p>							
<p>Strengthening Families Program (SFP)</p> <p>Universal Selective</p>	<p>The Strengthening Families Program I (SFP-I) involves elementary school aged children (6 to 12 years old) and their families in family skills training sessions. SFP uses family systems and cognitive-behavioral approaches to increase resilience and reduce risk factors for behavioral, emotional, academic, and social problems. It builds on protective factors by:</p> <ul style="list-style-type: none"> • Improving family relationships • Improving parenting skills • Increasing the youth's social and life skills <p>SFP offers incentives for attendance, good behavior in children, and homework completion to increase program recruitment and participation.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Model Program: National Institute on Drug Abuse</p> <p>Effective Program: Office of Juvenile Justice and Delinquency Prevention</p>	<p>Karol Kumpfer, Ph.D. Department of Health Promotion and Education University of Utah 250 South, 1850 East, Room 215 Salt Lake City, UT 84112-0920 Phone: (801) 581-7718 Fax: (801) 581-5872 Email: karol.kumpfer@health.utah.edu Web site: www.strengtheningfamilies.org/html/programs_1999/06_SFP.htm</p> <p>Henry O. Whiteside, Ph.D. Managing Partner, Training Workshop Contact Lutra Group, Inc 5215 Pioneer Fork Road Salt Lake City, UT 84108 Phone: 801-583-4601 Fax: 801-583-7979 Email: hwhiteside@lutrargroup.com</p>	6-12 and parents	Male and Female	African American, American Indian/Alaskan, Native American, Hispanic/Latino, Native Hawaiian and Other Pacific Islander (NHOPI), White	Rural, Suburban, and Urban community centers, housing communities, mental health centers, and schools	<ul style="list-style-type: none"> • Reduction in child risk status • Improved family relationships 	<ul style="list-style-type: none"> • Therapeutic child play • Parent training • Support services 	<p>Training:</p> <ul style="list-style-type: none"> • \$3,500 for up to 40 participants <p>Materials:</p> <ul style="list-style-type: none"> • \$175 for 6 manuals
<p>Strengthening Families Program: For Parents and Youth 10-14</p> <p>Universal</p>	<p>The Strengthening Families Program for Parents and Youth 10-14 (SFP 10-14) is a video-based intervention designed to reduce adolescent substance abuse and other problematic behaviors in youth 10 to 14 years old. The program is delivered within parent, youth, and family sessions using</p>	<p>Virginia Molgaard, Ph.D. Rural Health Center 2625 North Loop Drive Suite 500 Ames, IA 50010-1260 Phone: (515) 294-8762 Fax: (515) 294-3613</p>	10-14	Male and Female	African American, American Indian/Alaskan, Native Asian American	Rural, Suburban, and Urban settings in community centers	<ul style="list-style-type: none"> • Improved parenting behaviors • Significant delays in initiation of alcohol, 	<ul style="list-style-type: none"> • Improve parenting skills • Build like skills in youth • Strengthen family bonds 	<p>Training</p> <ul style="list-style-type: none"> • Please contact program developer for cost • Onsite training, technical support by telephone, and a three-step train-the-trainer protocol

	<p>narrated videos that portray typical youth and parent situations. Sessions are highly interactive and include role-playing, discussions, learning games, and family projects designed to:</p> <ul style="list-style-type: none"> • Improve parenting skills • Build life skills in youth • Strengthen family bonds <p>The basic program is delivered over 7 weeks, usually in the evenings. Four optional booster sessions can to be held 3 to 12 months after the basic sessions. Bringing parents and youth together in SFP 10–14 has been particularly effective at building parent skills (e.g., monitoring, setting limits, expressing affection) and youth skills (e.g., resisting peer pressure, making positive goals, managing strong emotions) and changing behavior.</p> <p>A print version of the parent sessions is available for non-English speaking Hispanic/Latino parents and other ethnic groups who may be less able to relate to the videos. (Program instructions are in English; posters, handouts, and scripts for role plays are available in both Spanish and English.)</p> <p>Recognition</p> <p>Exemplary Program: U.S. Department of Education</p> <p>Exemplary Program: Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice</p> <p>Effective Program: National Institute on Drug Abuse, U.S. Department of Health and Human Services</p>	<p>Email: vmolgaar@iastate.edu</p> <p>For information about materials: Program Assistant Catherine Webb Iowa State University Extension Institute for Social and Behavioral Research Iowa State University Ames, IA 50010 Phone: (515) 294-1426 Fax: (515) 294 3613 Email: cwebb@iastate.edu Web site: www.extension.iastate.edu/sfp/</p>			Hispanic/Latino White		tobacco, and marijuana use		are available Materials • N/A
<p>Students Managing Anger and Resolution Together (SMART) Team</p> <p>Universal</p>	<p>SMART Team is an eight-module, multimedia software program designed to teach violence prevention messages and methods to students in grades six through nine (11 to 15 years old). The program's content fits well with commonly used conflict-mediation curricula and other violence prevention strategies schools may implement. Operation is straightforward, so students can access the modules independently for information, skill-building practice, or to resolve a conflict. This independence eliminates the need for trained adult implementers.</p> <p>Recognition</p>	<p>Kris Bosworth, Ph.D. University of Arizona College of Education P.O. Box 210069 Tucson, AZ 85721-0069 Phone: (520) 626-4964 Fax: (520) 626-9258 Email: boswork@u.arizona.edu Web site: www.drugstats.org</p> <p>Materials and Training: Learning Multisystems 320 Holtzman Road Madison, WI 53713 Phone: (800) 362-7323 Fax: (608) 273-8065</p>	11–15	Male and Female	White	Urban and Suburban middle and high schools; clinical and non-clinical settings	<ul style="list-style-type: none"> • Increased understanding of how problem situations escalate into violence • Better use of non-violent solutions 	<ul style="list-style-type: none"> • Computer-based • Anger management • Dispute resolution • Mediation skills • Violence prevention 	<p>Training:</p> <ul style="list-style-type: none"> • No training is required. Someone who can load the software and assist students to initially access the program. <p>Materials:</p> <ul style="list-style-type: none"> • \$549 for software package (Mac only) • Single CD Set: \$190 (A set includes both Managing Anger and Resolving Conflicts CDs.) • Lab Packs <p>♦ 5 sets: \$380</p>

	<p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Promising Program: U.S. Department of Education</p>	Web site: http://www.lmssite.com							<p>♦ 10 sets: \$570 ♦ 20 sets: \$760</p> <ul style="list-style-type: none"> • Network/Site License: \$950 (Allows software installation on all computers in a single building.) • SMART Team software package, Cool 2B Safe, violence prevention video series and print material • Materials also available in Spanish
<p>Teaching Students to be Peacemakers</p> <p>Universal</p>	<p>Teaching Students To Be Peacemakers (Peacemakers) is a program that teaches conflict resolution procedures and skills to all students, faculty, and staff members. It is based on the premises that conflicts cannot be suppressed or denied, and conflicts may have positive or negative consequences, depending on how they are managed. Students learn how to engage in problem-solving negotiations and how to mediate schoolmates' conflicts.</p> <p>The program aims to—</p> <ul style="list-style-type: none"> • Make the school a safe place where violence and destructive conflicts are prevented and constructive conflicts are used to improve the quality of school life. • Teach students, faculty, and staff how to mediate schoolmates' conflicts and negotiate to solve problems and reach agreements liked by all disputants. • Ensure all school members use the same procedures for resolving conflicts. • Enable teachers and administrators to model constructive conflict resolution. • Free teachers' time and energy otherwise spent on managing classroom conflicts. <p>Delivered through twenty 30-minute lessons, the program serves as a vital component in an overall strategy to reduce violence in schools. It also enhances academic learning and achievement. Now translated into Spanish, Peacemakers is used in the United States, Canada, and many other parts of the world.</p> <p>Recognition</p>	<p>David W. Johnson, Ed.D. Cooperative Learning Center College of Education and Human Development University of Minnesota, 60 Peik Hall 159 Pillsbury Drive S.E. Minneapolis, MN 5545-0298 Phone: (952) 831-9500 Fax: (952) 831-9332 Email: johns010@umn.edu</p>	5-14	Male and Female	African American, American Indian/Alaskan, Native, Hispanic/Latino, White	Rural, suburban, and urban settings in schools	<ul style="list-style-type: none"> • 62% of Peacemaker students reached the ideal problem-solving agreement when placed in a conflict • 29% of Peacemaker students viewed conflicts positively • 90% of Peacemaker students recalled 100% of the negotiation and mediation procedures a few days after training • 75% of Peacemaker students recalled 100% of the negotiation and mediation procedures 1 year after training • When integrated into academic 	<ul style="list-style-type: none"> • Information sharing • Booster Sessions • Peer leadership, counseling or support • Skill development 	<p>Training:</p> <ul style="list-style-type: none"> • N/A <p>Materials:</p> <ul style="list-style-type: none"> • N/A

	Model Program —Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services						units, the conflict resolution training tends to increase academic achievement and long-term retention of the academic material.		
Team Awareness Universal Selective Indicated	<p>Team Awareness is a workplace-training program that addresses behavioral risks associated with substance abuse among employees, their coworkers and, indirectly, their families. This program has been shown to increase employee help-seeking for and supervisor responsiveness to, troubled workers, enhance the work climate, and reduce problem drinking. These results are achieved by</p> <ul style="list-style-type: none"> • Promoting social health • Promoting increased communication between workers • Improving knowledge and attitudes toward alcohol- and drug-related protective factors in the workplace (such as company policy or Employee Assistance Programs) • Increasing peer referral behaviors <p>The training consists of six modules and is conducted across two 4-hour sessions with a company or business any size. Larger companies generally require multiple training sessions. Team Awareness is highly interactive and uses group discussion, communication exercises, a board game, role play, and self-assessments. Modules cover policy ownership, enabling, stress management, listening skills, and peer referral.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p>	<p>Joel B. Bennett, Ph.D. Organizational Wellness Learning Systems 4413 Overton Terrace Fort Worth, TX 76109 Phone: (817) 921-4260 Email: owls@charter.net Web site: www.organizationalwellness.com</p> <p>Wayne E.K. Lehman, Ph.D. Institute of Behavioral Research Texas Christian University TCU Box 298740 Fort Worth, TX 76129 Phone: (817) 257-7226 Email: ibr@tcu.edu Web site: www.ibr.tcu.edu</p>	18-55+	Male and Female	African American Hispanic/Latino White	Suburban and Urban workplaces	<ul style="list-style-type: none"> • At six month follow up analysis, compared to a control group, employees who participated in the program were: • Nearly three times less likely to work with or miss work due to a hangover • Significantly less likely to come to work under the influence of illegal drugs or alcohol • Two times as likely to decrease problem drinking behaviors • Likely to double their help-seeking behavior • Significantly more likely to work in 	<ul style="list-style-type: none"> • Peer leadership, counseling or support • Workplace training • Focus groups 	<p>Training:</p> <ul style="list-style-type: none"> • Facilitator training cost is \$1,250 per day plus travel expenses • Train the trainer costs are \$3,000, with reduced costs for multiple trainees <p>Materials:</p> <ul style="list-style-type: none"> • Materials are free for downloading at www.organizationalwellness.com

							groups that encourage coworkers to stop a drinking or drug habit		
							<ul style="list-style-type: none"> • Coworkers were less likely to drink together 		
Too Good For Drugs (TGFD) Universal	<p>Too Good For Drugs (TGFD) is a school-based prevention program designed to reduce the intention to use alcohol, tobacco, and illegal drugs in middle and high school students. Developed by the Mendez Foundation for use with students in kindergarten through 12th grade (5 to 18 years old), TGFD has a separate, developmentally appropriate curriculum for each grade level, and is designed to develop:</p> <ul style="list-style-type: none"> • Personal and interpersonal skills relating to alcohol, tobacco, and illegal drug use • Appropriate attitudes toward alcohol, tobacco, and illegal drug use • Knowledge of the negative consequences of alcohol, tobacco, and illegal drug use and benefits of a drug-free lifestyle • Positive peer norms <p>The program's highly interactive teaching methods encourage students to bond with prosocial peers, and engages students through role-play, cooperative learning, games, small group activities and class discussions. Students have many opportunities to participate and receive recognition for involvement. TGFD also impacts students through a family component used in each grade level: "Home Workouts" is available for use with families in kindergarten through 8th grade, and "Home Pages" is used in high school.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S.Department of Health and Human Services</p> <p>Excellence in Prevention: American Medical Association</p> <p>Shining Star Award: Southeastern Drug-Free Schools</p>	<p>Susan K. Chase Director of Training Prevention Education Programs Mendez Foundation 601 S. Magnolia Avenue Tampa, FL 33606 Phone: (800) 750-0986 ext.206 Fax: (813) 251-3237 Email: schase@mendezfoundation.org Web site: www.mendezfoundation.org/</p> <p>Cindy Coney Program Contact Prevention Education Programs Mendez Foundation</p>	5-18	Male and Female	African American Asian American Hispanic/Latino Native Hawaiian and Other Pacific Islander (NHOPI) White	Rural, Suburban, and Urban schools; optional component for after-school settings	<ul style="list-style-type: none"> • Reduced intentions to use cigarettes, alcohol, marijuana • Reduced intentions to engage in aggressive behavior • Improved decisionmaking, goal setting, and peer resistance skills • Increased friendships with peers less likely to use alcohol, tobacco, and illegal drugs 	<ul style="list-style-type: none"> • Prosocial skills development • Multi-lesson, multi-grade level programming • Normative education • Diverse role-play situations • Cooperative learning • Parental involvement 	<p>Training:</p> <ul style="list-style-type: none"> • Training, with a purchase of \$1,500 or more in materials, costs \$1,500 plus expenses <p>Materials:</p> <ul style="list-style-type: none"> • \$100-\$130 for individual K-8 kits (see program Web site for details) • \$750 for Too Good For Drugs Violence High School Kit • \$595 for Too Good For Drugs Violence After-School Activities Kit • \$250 for Too Good For Drugs Violence Educators Kit (staff development)

	First Place in Prevention: Florida Alcohol and Drug Abuse Association/Department of Children and Families Best Practices Conference								
Trauma Focused Cognitive Behavior Therapy (TF-CBT) Selective Indicated	<p>Trauma Focused Cognitive Behavior Therapy (TF-CBT) formerly Cognitive Behavioral Therapy for Child and Adolescent Traumatic Stress (CBT-CATS) is a treatment intervention designed to help children, youth, and their parents overcome the negative effects of traumatic life events such as child sexual or physical abuse; traumatic loss of a loved one; domestic, school, or community violence; or exposure to disasters, terrorist attacks, or war trauma. It was developed by integrating cognitive and behavioral interventions with traditional child abuse therapies, in order to focus on enhancing children's interpersonal trust and re-empowerment.</p> <p>TF-CBT can be provided to children 3 to 18 years old, and their parents, by trained mental health professionals in individual, family, and group sessions in outpatient settings. CBT-CATS targets symptoms of Posttraumatic Stress Disorder (PTSD), which often co-occur with depression and acting-out behaviors. PTSD includes an array of anxiety symptoms as well as:</p> <ul style="list-style-type: none"> • Intrusive thoughts of the traumatic event • Avoidance of reminders of the trauma • Emotional numbing • Excessive physical arousal/activity • Irritability • Trouble sleeping or concentrating <p>The intervention also addresses issues commonly experienced by traumatized children, such as poor self-esteem, difficulty trusting others, mood instability, and self-injurious behavior, including substance use.</p> <p>Recognition</p> <p>Model Program: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services</p> <p>Betty Elmer Award: Family Resources of Pittsburgh (Drs. Cohen and Mannarino)</p> <p>Greater Pittsburgh Psychological Association Legacy Award (Dr. Mannarino)</p>	<p>Judith Cohen, M.D. Professor of Psychiatry, Medical Director Center for Traumatic Stress in Children Adolescents 4 Allegheny Center, Room 864 Pittsburgh, PA 15212 Phone: (412) 330-4321 Fax: (412) 330-4377 Email: JCohen1@wpahs.org</p> <p>Anthony P. Mannarino, Ph.D. Professor of Psychiatry and Chair, Department of Psychiatry Center for Traumatic Stress in Children Adolescents Allegheny General Hospital 4 Allegheny Center, 8th floor Pittsburgh, PA 15212 Phone: (412) 330-4312 Fax: (412) 330-4377 Email: amannari@wpahs.org</p>	3-18	Male and Female	African American, Hispanic/Latino, and White	Rural, Suburban, and Urban clinical outpatient facilities	<ul style="list-style-type: none"> • Significantly less acting-out behavior • Significantly reduced PTSD symptoms • Significantly greater improvement in depressive symptoms • Significantly greater improvement in social competence • Maintained these differential improvements over the year after treatment ended 	<ul style="list-style-type: none"> • Develops adaptive skills for dealing with stress • Decreases children's anxiety about thinking or talking about the event • Enhances accurate and helpful cognitions • Enhances children's personal safety skills • Resolves parental distress about the child's experience • Enhances parental support for their children • Prepares children to anticipate and cope with traumatic and loss reminders 	<p>Training:</p> <ul style="list-style-type: none"> • Training cost varies depending on length needed and number of participants; however, is estimated at \$1000 per day, per trainer for up to 25 participants. <p>Materials:</p> <ul style="list-style-type: none"> • Treatment manual and other materials cost \$50 total • Optional \$50 video or DVD

	Outstanding Professional Award: American Professional Society on the Abuse of Children (Dr. Cohen)								
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